

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Timmins for Congress

ADDRESS (number and street)

100 La Salle Street

Apt. 16F

New York

NY

10027

☐ Check if different
than previously
reported. (ACC)

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00936252

3. IS THIS
REPORT☐ NEW
(N)

OR

☐ AMENDED
(A)

STATE ▼ DISTRICT

NY

12

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)

☒ Termination Report (TER)(b) 12-Day **PRE**-Election Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
07 / 01 / 2026

through

M M / D D / Y Y Y Y
07 / 30 / 2026*I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.*

Type or Print Name of Treasurer Timmins, Susan, B.,

Signature of Treasurer

Timmins, Susan, B.,

Date

M M / D D / Y Y Y Y
07 / 30 / 2026

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this 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

Timmins for Congress

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 01 2026

To:

M M / D D / Y Y Y Y
07 30 2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	17182.71
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	17182.71
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	302.39	32951.76
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	134.29
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	302.39	32817.47
8. Cash on Hand at Close of Reporting Period (from Line 27)	- 1025.48	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	24068.23	

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

Timmins for Congress

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2026

To:

MM / DD / YYYY
07 / 30 / 2026**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).....

0.00

13032.93

(ii) Unitemized

0.00

4149.78

(iii) TOTAL of contributions
from individuals ▶

0.00

17182.71

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

0.00

17182.71

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

248.23

17908.23

(b) All Other Loans.....

60.00

60.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

308.23

17968.23

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

0.00

134.29

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

70.00

70.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

378.23

35355.23

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	302.39	32951.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	1800.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	1800.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	148.95	1628.95
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	451.34	36380.71

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	- 952.37
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	378.23
25. SUBTOTAL (add Line 23 and Line 24).....	- 574.14
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	451.34
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	- 1025.48

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 27

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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

NAME OF COMMITTEE (In Full)

Timmins for Congress

Full Name (Last, First, Middle Initial)

Timmins, Patrick, John, ,

A.

Mailing Address 100 La Salle Street

Apt. 16F

City

New York

State

NY

Zip Code

10027

FEC ID number of contributing
federal political committee.

C H6NY12396

Name of Employer

John Jay College CUNY

Occupation

Professor

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

11210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2026

Transaction ID : SA13A.4541

Amount of Each Receipt this Period

100.00

☐ Memo Item

Cash deposit to campaign acct to cover expenses

Full Name (Last, First, Middle Initial)

Timmins, Susan, B, ,

B.

Mailing Address 100 La Salle Street

City

New York

State

NY

Zip Code

10027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Associate Staff Analyst

Occupation

City of New York

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5928.16

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 21 / 2026

Transaction ID : SA13A.4527

Amount of Each Receipt this Period

148.23

☐ Memo Item

Deposit to campaign acct to cover overdraft

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

248.23

248.23

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 27

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☒ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Timmins for Congress

Full Name (Last, First, Middle Initial)

Timmins, Susan, B, ,

A.

Mailing Address 100 La Salle Street

City
New York

State
NY

Zip Code
10027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Associate Staff Analyst

Occupation
City of New York

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5779.93

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2026

Transaction ID : SA13B.4536

Amount of Each Receipt this Period

60.00

☐ Memo Item

Txf of funds to campaign acct to cover misc charges

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

60.00

60.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 27

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Timmins for Congress

Full Name (Last, First, Middle Initial)

A. DonorboxMailing Address 1520 Belle View Blvd.
#4106City
AlexandriaState
VAZip Code
22307Purpose of Disbursement
Donorbox monthly subscription feeCandidate Name
Timmins for CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 12

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		06		2026

FEC Identification Number

C C00936252

Amount of Each Disbursement this Period

150.00

Transaction ID : SB17.4533

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Google LLC

Mailing Address 1600 Amphitheatre Parkwa

City
Mountain ViewState
CAZip Code
94043Purpose of Disbursement
Google Cloud subscription chargeCandidate Name
Timmins for CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 12

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2026

FEC Identification Number

C C00936252

Amount of Each Disbursement this Period

77.75

Transaction ID : SB17.4538

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Google LLC

Mailing Address 1600 Amphitheatre Parkwa

City
Mountain ViewState
CAZip Code
94043Purpose of Disbursement
Google Cloud chargesCandidate Name
Timmins for CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 12

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2026

FEC Identification Number

C C00936252

Amount of Each Disbursement this Period

0.87

Transaction ID : SB17.4531

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

228.62

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 27

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Timmins for Congress

Full Name (Last, First, Middle Initial)

A. Stripe, Inc.

Mailing Address 510 Townsend Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2026

City
San FranciscoState
CAZip Code
94103

FEC Identification Number

C C00936252

Purpose of Disbursement
Charges for Stripe AccountCandidate Name
Timmins for CongressCategory/
Type

Amount of Each Disbursement this Period

10.89

Transaction ID : SB17.4535

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 12

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

10.89

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

239.51

SCHEDULE C (FEC Form 3)
LOANS

PAGE 9 OF 27

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4115

Timmins for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Timmins, Patrick, John, ,

Mailing Address

100 La Salle Street
Apt. 16F

City

New York

State

NY

ZIP Code

10027

☒ Personal Funds of the Candidate

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 23 / 2026M M / D D / Y Y Y Y
none

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 10 OF 27

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4118

Timmins for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Timmins, Patrick, John, ,

Mailing Address

100 La Salle Street
Apt. 16F

City

New York

State

NY

ZIP Code

10027

☒ Personal Funds of the Candidate

Original Amount of Loan

10.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 23 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

10.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 11 OF 27

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4119

Timmins for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Timmins, Patrick, John, ,

Mailing Address

100 La Salle Street
Apt. 16F

City

New York

State

NY

ZIP Code

10027

☒ Personal Funds of the Candidate

Original Amount of Loan

2500.00

Cumulative Payment To Date

1800.00

Balance Outstanding at Close of This Period

700.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 / 26 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

700.00

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.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 12 OF 27

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4120

Timmins for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Timmins, Patrick, John, ,

Mailing Address

100 La Salle Street
Apt. 16F

City

New York

State

NY

ZIP Code

10027

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 / 06 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5000.00

TOTALS This Period (last page in this line only).....▶

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 13 OF 27

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4121

Timmins for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Timmins, Patrick, John, ,

Mailing Address

100 La Salle Street
Apt. 16F

City

New York

State

NY

ZIP Code

10027

☒ Personal Funds of the Candidate

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 / 26 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

2000.00

TOTALS This Period (last page in this line only).....▶

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 14 OF 27

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4122

Timmins for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Timmins, Patrick, John, ,

Mailing Address

100 La Salle Street
Apt. 16F

City

New York

State

NY

ZIP Code

10027

☒ Personal Funds of the Candidate

Original Amount of Loan

1500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1500.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 30 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 15 OF 27

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4541

Timmins for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Timmins, Patrick, John, ,

Mailing Address

100 La Salle Street
Apt. 16F

City

New York

State

NY

ZIP Code

10027

☐ Personal Funds of the Candidate

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
07 01 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
N/A

0.00

% (apr)

☐ Yes☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 16 OF 27

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4376

Timmins for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Timmins, Susan, B, ,

Mailing Address

100 La Salle Street

City

New York

State

NY

ZIP Code

10027

☒ Personal Funds of the Candidate

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 18 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
N/A

0.00

% (apr)

☐ Yes☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**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.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 17 OF 27

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4453

Timmins for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Timmins, Susan, B, ,

Mailing Address

100 La Salle Street

City

New York

State

NY

ZIP Code

10027

☐ Personal Funds of the Candidate

Original Amount of Loan

1500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1500.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 09 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

n/a

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 18 OF 27

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4461

Timmins for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Timmins, Susan, B, ,

Mailing Address

100 La Salle Street

City

New York

State

NY

ZIP Code

10027

☐ Personal Funds of the Candidate

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 15 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

n/a

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 19 OF 27

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4465

Timmins for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Timmins, Susan, B, ,

Mailing Address

100 La Salle Street

City

New York

State

NY

ZIP Code

10027

☐ Personal Funds of the Candidate

Original Amount of Loan

1200.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1200.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 17 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

n/a

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1200.00

TOTALS This Period (last page in this line only).....▶

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 20 OF 27

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4483

Timmins for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Timmins, Susan, B, ,

Mailing Address

100 La Salle Street

City

New York

State

NY

ZIP Code

10027

☐ Personal Funds of the Candidate

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 / 22 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
N/A

0.00

% (apr)

☐ Yes☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**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.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 21 OF 27

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4527

Timmins for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Timmins, Susan, B, ,

Mailing Address

100 La Salle Street

City

New York

State

NY

ZIP Code

10027

☒ Personal Funds of the Candidate

Original Amount of Loan

148.23

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

148.23

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
07 21 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
N/A

0.00

% (apr)

☐ Yes☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

148.23

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.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 22 OF 27

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4409

Timmins for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Timmins for Congress

Mailing Address

100 La Salle Street
Apt. 16F

City

New York

State

NY

ZIP Code

10027

☒ Personal Funds of the Candidate

Original Amount of Loan

250.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

250.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 10 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
N/A

0.00

% (apr)

☐ Yes☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

250.00

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.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 23 OF 27

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4448

Timmins for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Timmins for Congress

Mailing Address

100 La Salle Street
Apt. 16F

City

New York

State

NY

ZIP Code

10027

☐ Personal Funds of the Candidate

Original Amount of Loan

600.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

600.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 08 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

n/a

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**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.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 24 OF 27

FOR LINE NUMBER:
(check only one)☐ 13a
☒ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4536

Timmins for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Timmins, Susan, B, ,

Mailing Address

100 La Salle Street

City

New York

State

NY

ZIP Code

10027

☐ Personal Funds of the Candidate

Original Amount of Loan

60.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

60.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
07 03 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
N/A

0.00

% (apr)

☐ Yes☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

60.00

TOTALS This Period (last page in this line only).....▶

16168.23

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

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 25 OF 27

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Timmins for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Timmins, Patrick, John, ,

Nature of Debt (Purpose):

Payment to Colin Wolfgang from personal
acct for Campaign/Communications
ConsultingMailing Address 100 La Salle Street
Apt. 16FCity
New YorkState
NYZip Code
10027

Outstanding Balance Beginning This Period

600.00

Transaction ID : SD10.4169

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

600.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Timmins, Patrick, John, ,

Nature of Debt (Purpose):

Payment to C. Hunt-Walker from P. Timmins
personal acct for Campaign website servicesMailing Address 100 La Salle Street
Apt. 16FCity
New YorkState
NYZip Code
10027

Outstanding Balance Beginning This Period

500.00

Transaction ID : SD10.4179

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Timmins, Patrick, John, ,

Nature of Debt (Purpose):

Paid Colin Wolfgang from personal acct for
Campaign/Communications ConsultingMailing Address 100 La Salle Street
Apt. 16FCity
New YorkState
NYZip Code
10027

Outstanding Balance Beginning This Period

500.00

Transaction ID : SD10.4167

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

1) **SUBTOTALS** This Period This Page (optional) ▶

1600.00

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 26 OF 27

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Timmins for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Timmins, Patrick, John, ,

Nature of Debt (Purpose):

Paid balance owed to Colin Wolfgang from
personal acct for Campaign/Communications
ConsultingMailing Address 100 La Salle Street
Apt. 16FCity
New YorkState
NYZip Code
10027

Outstanding Balance Beginning This Period

700.00

Transaction ID : SD10.4168

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

700.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Timmins, Patrick, John, ,

Nature of Debt (Purpose):

Payment to C. Hunt-Walker from Patrick
Timmins personal acct for Campaign Website
ServicesMailing Address 100 La Salle Street
Apt. 16FCity
New YorkState
NYZip Code
10027

Outstanding Balance Beginning This Period

500.00

Transaction ID : SD10.4178

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Timmins, Patrick, John, ,

Nature of Debt (Purpose):

Paid Colin Wolfgang from Personal account
for Campaign Consulting/CommunicationsMailing Address 100 La Salle Street
Apt. 16FCity
New YorkState
NYZip Code
10027

Outstanding Balance Beginning This Period

250.00

Transaction ID : SD10.4166

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

1) **SUBTOTALS** This Period This Page (optional) ▶

1450.00

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 27 OF 27

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Timmins for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Timmins, Patrick, John, ,

Nature of Debt (Purpose):

Paid out of personal acct for Consultation and
Petition ServicesMailing Address 100 La Salle Street
Apt. 16FCity
New YorkState
NYZip Code
10027

Outstanding Balance Beginning This Period

4000.00

Transaction ID : SD10.4170

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Timmins, Patrick, John, ,

Nature of Debt (Purpose):

Payment to C. Hunt-Walker from Patrick
Timmins personal acct for campaign website
servicesMailing Address 100 La Salle Street
Apt. 16FCity
New YorkState
NYZip Code
10027

Outstanding Balance Beginning This Period

850.00

Transaction ID : SD10.4177

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

850.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

4850.00

2) **TOTALS** This Period (last page this line number only)

7900.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

16168.23

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

24068.23