

**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

Will Rollins for Congress

ADDRESS (number and street)

PO Box 6282

414 W Grand Blvd

Corona

CA

92878

☐ Check if different
than previously
reported. (ACC)

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00792507

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

CA

41

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
04 / 01 / 2026

through

M M / D D / Y Y Y Y
06 / 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

Petterson, Jay, , ,

Signature of Treasurer

Petterson, Jay, , ,

Date

M M / D D / Y Y Y Y
07 / 15 / 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

Will Rollins for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	6

	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	7840.29
(b) Total Contribution Refunds (from Line 20(d))	0.00	5006.68
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	2833.61
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1796.47	278964.35
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	54730.02
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	1796.47	224234.33
8. Cash on Hand at Close of Reporting Period (from Line 27)	1749.91	
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)	0.00	

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

Will Rollins for Congress

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2026

To:

MM / DD / YYYY
06 / 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).....

(ii) Unitemized

(iii) TOTAL of contributions
from individuals ▶

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs)

(d) The Candidate

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

13. LOANS:

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

(b) All Other Loans.....

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)15. OTHER RECEIPTS
(Dividends, Interest, etc.)16. **TOTAL RECEIPTS** (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

0.00

500.00

0.00

340.29

0.00

840.29

0.00

0.00

0.00

7000.00

0.00

0.00

0.00

7840.29

0.00

2948.58

0.00

0.00

0.00

0.00

0.00

0.00

0.00

54730.02

0.00

183911.83

0.00

249430.72

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.....	1796.47	278964.35
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	5006.68
(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	5006.68
21. OTHER DISBURSEMENTS	1000.00	212043.64
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	2796.47	496014.67

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4546.38
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	4546.38
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2796.47
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1749.91

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

PAGE 5 OF 9

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 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)

Will Rollins for Congress

Full Name (Last, First, Middle Initial)

A. Amalgamated Bank

Mailing Address 1825 K St NW

City
WashingtonState
DCZip Code
20006-1202Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

113.19

Transaction ID : 500390248

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amalgamated Bank

Mailing Address 1825 K St NW

City
WashingtonState
DCZip Code
20006-1202Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

112.18

Transaction ID : 500390249

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Amalgamated Bank

Mailing Address 1825 K St NW

City
WashingtonState
DCZip Code
20006-1202Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

112.07

Transaction ID : 500390250

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

337.44

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)

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

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NAME OF COMMITTEE (In Full)

Will Rollins for Congress

Full Name (Last, First, Middle Initial)

A. Blue Wave Political Partners, LLCMailing Address 401 2Nd Ave S
Ste 303City
SeattleState
WAZip Code
98104-2862Purpose of Disbursement
Compliance Consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : 500390240

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Google

Mailing Address 1600 Amphitheatre Pkwy

City
Mountain ViewState
CAZip Code
94043-1351Purpose of Disbursement
Software Rental

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

240.00

Transaction ID : 500390251

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Intuit

Mailing Address 2632 Marine Way

City
Mountain ViewState
CAZip Code
94043-1126Purpose of Disbursement
Software Rental

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

304.01

Transaction ID : 500390244

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

794.01

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)

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

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NAME OF COMMITTEE (In Full)

Will Rollins for Congress

Full Name (Last, First, Middle Initial)

A. Intuit

Mailing Address 2632 Marine Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2026

City
Mountain ViewState
CAZip Code
94043-1126

FEC Identification Number

C

Purpose of Disbursement
Software Rental

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

304.01

Transaction ID : 500390245

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Intuit

Mailing Address 2632 Marine Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2026

City
Mountain ViewState
CAZip Code
94043-1126

FEC Identification Number

C

Purpose of Disbursement
Software Rental

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

304.01

Transaction ID : 500390246

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Press Enterprise

Mailing Address 3512 14Th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		09		2026

City
RiversideState
CAZip Code
92501-3841

FEC Identification Number

C

Purpose of Disbursement
Subscription

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

14.00

Transaction ID : 500390241

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

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

622.02

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)

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

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NAME OF COMMITTEE (In Full)

Will Rollins for Congress

Full Name (Last, First, Middle Initial)

A. Press Enterprise

Mailing Address 3512 14Th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		07		2026

City
RiversideState
CAZip Code
92501-3841

FEC Identification Number

C

Purpose of Disbursement
Subscription

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

14.00

Transaction ID : 500390242

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Press Enterprise

Mailing Address 3512 14Th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2026

City
RiversideState
CAZip Code
92501-3841

FEC Identification Number

C

Purpose of Disbursement
Subscription

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

14.00

Transaction ID : 500390243

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Square, Inc.Mailing Address 1455 Market St
Ste 600

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		21		2026

City
San FranciscoState
CAZip Code
94103-1332

FEC Identification Number

C

Purpose of Disbursement
Software Rental

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

15.00

Transaction ID : 500390247

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

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

43.00

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

1796.47

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

PAGE 9 OF 9

☐ 17 20a	☐ 18 20b	☐ 19a 20c	☒ 19b 21
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NAME OF COMMITTEE (In Full)

Will Rollins for Congress

Full Name (Last, First, Middle Initial)

A. DR. JASMEET BAINS FOR CONGRESSMailing Address 8200 Stockdale Hwy
Ste # M10City
BakersfieldState
CAZip Code
93311-1029Purpose of Disbursement
ContributionCandidate Name
BAINS, JASMEET, , ,Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 22

Date of Disbursement

M M / D D / Y Y Y Y
05 / 06 / 2026

FEC Identification Number

C C00912147

Amount of Each Disbursement this Period

1000.00

Transaction ID : 500390252

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

1000.00

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

1000.00