

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Baird for Congress

ADDRESS (number and street) PO Box 5016

Check if different than previously reported. (ACC)

Vancouver WA 98668

2. **FEC IDENTIFICATION NUMBER** C00310904

IS THIS REPORT NEW (N) **OR** AMENDED (A)

CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**

WA 03

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 _____ in the State of _____

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

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

Election on _____ in the State of _____

5. Covering Period 04 01 2010 through 06 30 2010

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 Chris Crowley

Signature of Treasurer Electronically Filed by Chris Crowley Date 07 15 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Baird for Congress

Report Covering the Period: From: To:

	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	138592.21
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	9226.21
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	129366.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	2083.20	163431.46
(b) Total Offsets to Operating Expenditures (from Line 14).....	149.71	1434.41
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	1933.49	161997.05
8. Cash on Hand at Close of Reporting Period (from Line 27).....	533241.25	
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:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Baird for Congress

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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	0.00	43100.00
(i) Itemized (use Schedule A).....	0.00	795.00
(ii) Unitemized.....	0.00	43895.00
(iii) TOTAL of contributions from individuals..... ▶	0.00	1000.00
(b) Political Party Committees.....	0.00	93697.21
(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	138592.21
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	149.71	1434.41
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	883.26	9499.11
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	1032.97	149525.73

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2083.20	163431.46
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	8950.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	276.21
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	9226.21
21. OTHER DISBURSEMENTS.....	6200.00	79100.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	8283.20	251757.67

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	540491.48
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	1032.97
25. SUBTOTAL (add Line 23 and Line 24).....	541524.45
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	8283.20
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	533241.25

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 15

(check only one)

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)
Baird for Congress

A.

Full Name (Last, First, Middle Initial)
Qwest

Mailing Address PO Box 91155

City State Zip Code
Seattle WA 98111-9255

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1013.53

Date of Receipt
06 / 01 / 2010

Transaction ID: C18639492

Amount of Each Receipt this Period
149.71

Refund

SUBTOTAL of Receipts This Page (optional)	▶	149.71
TOTAL This Period (last page this line number only)	▶	149.71

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

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

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

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NAME OF COMMITTEE (In Full)
Baird for Congress

A.

Full Name (Last, First, Middle Initial)
Key Bank

Mailing Address 444 SW 5th Ave

City State Zip Code
Portland OR 97204-2206

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1051.56

Date of Receipt

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

Transaction ID: C18631811

Amount of Each Receipt this Period
41.19

* Interest income

B.

Full Name (Last, First, Middle Initial)
Key Bank

Mailing Address 444 SW 5th Ave

City State Zip Code
Portland OR 97204-2206

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1051.56

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	8	/	2	0	1	0

Transaction ID: C18655207

Amount of Each Receipt this Period
42.57

* Interest income

C.

Full Name (Last, First, Middle Initial)
Key Bank

Mailing Address 444 SW 5th Ave

City State Zip Code
Portland OR 97204-2206

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1051.56

Date of Receipt

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

Transaction ID: C18728539

Amount of Each Receipt this Period
41.22

* Interest income

SUBTOTAL of Receipts This Page (optional) ► **124.98**

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

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

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

FOR LINE NUMBER: PAGE 7 / 15
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Baird for Congress

A. Full Name (Last, First, Middle Initial)
Riverview Community Bank
Mailing Address PO Box 872290
City Vancouver State WA Zip Code 98687-2290
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1430.83
Date of Receipt: 04 / 30 / 2010
Transaction ID: C18631812
Amount of Each Receipt this Period: 80.02
* Interest income

B. Full Name (Last, First, Middle Initial)
Riverview Community Bank
Mailing Address PO Box 872290
City Vancouver State WA Zip Code 98687-2290
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1430.83
Date of Receipt: 05 / 28 / 2010
Transaction ID: C18655206
Amount of Each Receipt this Period: 80.08
* Interest income

C. Full Name (Last, First, Middle Initial)
Riverview Community Bank
Mailing Address PO Box 872290
City Vancouver State WA Zip Code 98687-2290
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1430.83
Date of Receipt: 06 / 30 / 2010
Transaction ID: C18728537
Amount of Each Receipt this Period: 75.00
* Interest income

SUBTOTAL of Receipts This Page (optional) ► 235.10
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 15
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Baird for Congress

A.	Full Name (Last, First, Middle Initial) Umpqua Bank		Date of Receipt
	Mailing Address PO Box 1820		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Roseburg	OR	97470-4717
	FEC ID number of contributing federal political committee.		Transaction ID: C18631955
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer		Occupation	<input type="text" value="147.22"/>
Receipt For: 2010		Election Cycle-to-Date ▼	* Interest income
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="3030.75"/>		
<input type="checkbox"/> Other (specify) ▼			

B.	Full Name (Last, First, Middle Initial) Umpqua Bank		Date of Receipt
	Mailing Address PO Box 1820		<input type="text" value="05"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Roseburg	OR	97470-4717
	FEC ID number of contributing federal political committee.		Transaction ID: C18655430
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer		Occupation	<input type="text" value="137.53"/>
Receipt For: 2010		Election Cycle-to-Date ▼	* Interest income
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="3030.75"/>		
<input type="checkbox"/> Other (specify) ▼			

C.	Full Name (Last, First, Middle Initial) Umpqua Bank		Date of Receipt
	Mailing Address PO Box 1820		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Roseburg	OR	97470-4717
	FEC ID number of contributing federal political committee.		Transaction ID: C18728536
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer		Occupation	<input type="text" value="162.22"/>
Receipt For: 2010		Election Cycle-to-Date ▼	* Interest income
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="3030.75"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="446.97"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
Baird for Congress

A. Full Name (Last, First, Middle Initial)
Wells Fargo Bank, N.A.
Mailing Address 1800 Main Street

City State Zip Code
Vancouver WA 98660

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3012.57

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 3 0 / 2 0 1 0

Transaction ID: C18728556

Amount of Each Receipt this Period
25.12

* Interest income

B. Full Name (Last, First, Middle Initial)
Wells Fargo Bank, N.A.
Mailing Address 1800 Main Street

City State Zip Code
Vancouver WA 98660

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3012.57

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 8 / 2 0 1 0

Transaction ID: C18728558

Amount of Each Receipt this Period
25.96

* Interest income

C. Full Name (Last, First, Middle Initial)
Wells Fargo Bank, N.A.
Mailing Address 1800 Main Street

City State Zip Code
Vancouver WA 98660

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3012.57

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 3 0 / 2 0 1 0

Transaction ID: C18728560

Amount of Each Receipt this Period
25.13

* Interest income

SUBTOTAL of Receipts This Page (optional) ► **76.21**

TOTAL This Period (last page this line number only) ► **883.26**

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 15

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Baird for Congress

A.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: D415532 Date of Disbursement 04 / 12 / 2010
	Mailing Address PO Box 6463	Amount of Each Disbursement this Period 140.17
	City Carol Stream State IL Zip Code 60197-6463	
	Purpose of Disbursement Telephone expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: D415536 Date of Disbursement 05 / 17 / 2010
	Mailing Address PO Box 6463	Amount of Each Disbursement this Period 178.74
	City Carol Stream State IL Zip Code 60197-6463	
	Purpose of Disbursement Telephone expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: D415539 Date of Disbursement 06 / 14 / 2010
	Mailing Address PO Box 6463	Amount of Each Disbursement this Period 154.61
	City Carol Stream State IL Zip Code 60197-6463	
	Purpose of Disbursement Telephone expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

473.52

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Baird for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Key Bank</p> <p>Mailing Address 444 SW 5th Ave</p> <p>City Portland State OR Zip Code 97204-2206</p> <p>Purpose of Disbursement Bank fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D415537</p> <p>Date of Disbursement 05 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 18.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Key Bank</p> <p>Mailing Address 444 SW 5th Ave</p> <p>City Portland State OR Zip Code 97204-2206</p> <p>Purpose of Disbursement Bank fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D415533</p> <p>Date of Disbursement 04 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 18.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Key Bank</p> <p>Mailing Address 444 SW 5th Ave</p> <p>City Portland State OR Zip Code 97204-2206</p> <p>Purpose of Disbursement Bank fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D415545</p> <p>Date of Disbursement 06 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 18.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

54.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Baird for Congress

<p>A. Full Name (Last, First, Middle Initial) NGP Software, Inc.</p> <p>Mailing Address 1225 I Street, NW Suite 1225</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Web/Database support</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D415535</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>B. Full Name (Last, First, Middle Initial) Winpisinger & Associates, Inc.</p> <p>Mailing Address 315 Inspiration Lane</p> <p>City Gaithersburg State MD Zip Code 20878</p> <p>Purpose of Disbursement FEC compliance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D415531</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 509.22</p>
<p>C. Full Name (Last, First, Middle Initial) Winpisinger & Associates, Inc.</p> <p>Mailing Address 315 Inspiration Lane</p> <p>City Gaithersburg State MD Zip Code 20878</p> <p>Purpose of Disbursement FEC compliance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D415534</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 255.19</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1264.41

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 15

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Baird for Congress

A.

Full Name (Last, First, Middle Initial)
Winpisinger & Associates, Inc.

Transaction ID: D415538

Date of Disbursement

Mailing Address 315 Inspiration Lane

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

City Gaithersburg State MD Zip Code 20878

Amount of Each Disbursement this Period

291.27

Purpose of Disbursement
FEC compliance

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

291.27

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

2083.20

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Baird for Congress

A.	Full Name (Last, First, Middle Initial) Committee to Elect Dennis Kampe <hr/> Mailing Address PO Box 821316 <hr/> City Vancouver State WA Zip Code 98682 <hr/> Purpose of Disbursement Non-Federal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D415543 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1600.00
B.	Full Name (Last, First, Middle Initial) Committee to Elect Monica Stonier <hr/> Mailing Address PO Box 871956 <hr/> City Vancouver State WA Zip Code 98687 <hr/> Purpose of Disbursement Non-Federal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D415542 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1600.00
C.	Full Name (Last, First, Middle Initial) SPRATT FOR CONGRESS COMMITTEE <hr/> Mailing Address PO BOX 830 <hr/> City YORK State SC Zip Code 29745 <hr/> Purpose of Disbursement Contribution Candidate Name John M. Spratt, Jr. <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 05 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D415541 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

4200.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 15

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Baird for Congress

A.

Full Name (Last, First, Middle Initial)
MATHESON FOR CONGRESS

Transaction ID: D415540

Date of Disbursement

Mailing Address P O Box 521048
Suite A

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

City State Zip Code
Salt Lake City UT 84152

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

--

Candidate Name
Jim Matheson

Category/
Type

Office Sought: House
 Senate
 President
State: UT District: 02

Disbursement For: 2010
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
TIM WALZ FOR US CONGRESS

Transaction ID: D415544

Date of Disbursement

Mailing Address PO Box 938

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

City State Zip Code
Mankato MN 56002

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

--

Candidate Name
Timothy J. Walz

Category/
Type

Office Sought: House
 Senate
 President
State: MN District: 01

Disbursement For: 2010
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

6200.00
