Image# 28935228493 FEC FORM 2 STATEMENT OF CANDIDACY

Brian N. Baird (b) Address (number and street) Check if address changed PO Box 5016 H6WA03135								
(b) Address (number and street) Check if address changed 2: Identification Number (c) City, State and ZIP Code WA 98661 3: Is This (A) Address (number and street) 5: Office Sught 8: Statement X New Y DEMOCRATIC PARTY House 8: State & District of Candidate DemocRATIC PARTY Amende 2: I hereby designate the following named political committee as my Principal Campaign Committee for the designation should be filed with the appropriate office listed in the instructions. 2010 (year of election) election(s). (A) Name of Committee (in full) Bair for Congress (b) Address (number and street) PO Box 5016 (c) City, State and ZIP Code WA 98661 98661 DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundrating Representatives) 8: I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candiday. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code (b) Address (number and street) (c) City, State and ZIP Code (c) City, State and ZIP Code (c) City, State and ZIP Code 98 0.00 for the primary election, and <td>1. (a) Name of Candidate (in full)</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	1. (a) Name of Candidate (in full)							
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Brian N. Baird 12/23/2008	I certify that I have	e examined this	Statement and	d to the best of	my knowledge	e and belief it is	true, correct	t, and complete.
	Signature of Candidate					Date		-
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C.§437g	Brian N. Baird						12/23/2008	3
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