

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

BAIRD FOR CONGRESS

ADDRESS (number and street)

PO BOX 5016

Check if different than previously reported. (ACC)

VANCOUVER

WA

98668

2. FEC IDENTIFICATION NUMBER ▼

C C00310904

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

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

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 / 2012

through

M M / D D / Y Y Y Y
09 / 30 / 2012

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 Cindy Gipson

Signature of Treasurer Cindy Gipson

[Electronically Filed]

Date

M M / D D / Y Y Y Y
10 / 13 / 2012

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

Office Use Only									
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SUMMARY PAGE
of Receipts and Disbursements

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	0.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	-50.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	50.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	155.75	23583.02
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	198.42
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	155.75	23384.60
8. Cash on Hand at Close of Reporting Period (from Line 27).....	353118.92	
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: / / To: / /

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	0.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	0.00	0.00
(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	0.00
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.)	0.00	198.42
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	189.74	2148.77
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	189.74	2347.19

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	155.75	23583.02
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	-50.00
(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	-50.00
21. OTHER DISBURSEMENTS	63000.00	97000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	63155.75	120533.02

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	416084.93
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	189.74
25. SUBTOTAL (add Line 23 and Line 24).....	416274.67
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	63155.75
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	353118.92

**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 15
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BAIRD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Wells Fargo Bank, N.A.		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2012	
Mailing Address 1800 Main Street		Transaction ID : SA15.4365	
City Vancouver	State WA	Zip Code 98660	Amount of Each Receipt this Period _____ 66.33 Interest income
FEC ID number of contributing federal political committee.		C _____	
Name of Employer	Occupation		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1251.99		

Full Name (Last, First, Middle Initial) B. Wells Fargo Bank, N.A.		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 31 / 2012	
Mailing Address 1800 Main Street		Transaction ID : SA15.4367	
City Vancouver	State WA	Zip Code 98660	Amount of Each Receipt this Period _____ 64.30 Interest income
FEC ID number of contributing federal political committee.		C _____	
Name of Employer	Occupation		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1316.29		

Full Name (Last, First, Middle Initial) C. Wells Fargo Bank, N.A.		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2012	
Mailing Address 1800 Main Street		Transaction ID : SA15.4380	
City Vancouver	State WA	Zip Code 98660	Amount of Each Receipt this Period _____ 59.11 Interest income
FEC ID number of contributing federal political committee.		C _____	
Name of Employer	Occupation		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1375.40		

SUBTOTAL of Receipts This Page (optional).....	_____ 189.74
TOTAL This Period (last page this line number only).....	_____ 189.74

**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 6 OF 15	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BAIRD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Winpisinger & Associates, Inc.			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2012	
Mailing Address 315 Inspiration Lane			Amount of Each Disbursement this Period 155.75 Transaction ID : SB17.4358	
City Gaithersburg	State MD	Zip Code 20878		
Purpose of Disbursement Administrative/Compliance		Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President				
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:		

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:		

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:		

SUBTOTAL of Disbursements This Page (optional).....	155.75
TOTAL This Period (last page this line number only).....	155.75

**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 7 OF 15
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BAIRD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. 17th Legislative District		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2012	
Mailing Address 718 NE 148th Avenue		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.4354	
City Vancouver State WA Zip Code 98684	Purpose of Disbursement Non-Federal Contribution Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
Candidate Name State: District:		State: District:	

Full Name (Last, First, Middle Initial) B. 17th Legislative District		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012	
Mailing Address 718 NE 148th Avenue		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.4368	
City Vancouver State WA Zip Code 98684	Purpose of Disbursement Non-Federal Contribution Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other	
Candidate Name State: District:		State: District:	

Full Name (Last, First, Middle Initial) C. 49th Legislative District		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2012	
Mailing Address 110 W. 28th Street		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.4356	
City Vancouver State WA Zip Code 98660	Purpose of Disbursement Non-Federal Contribution Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
Candidate Name State: District:		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3000.00
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 8 OF 15			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BAIRD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BLUMENAUER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 830 NE HOLLADAY, #105		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.4312
City PORTLAND	State OR	
Zip Code 97232	Purpose of Disbursement Contribution	Category/ Type 011
Candidate Name EARL BLUMENAUER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OR District: 03	

Full Name (Last, First, Middle Initial) B. BONAMICI FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 2236 SE 10TH AVE		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.4318
City PORTLAND	State OR	
Zip Code 97214	Purpose of Disbursement Contribution	Category/ Type 011
Candidate Name SUZANNE BONAMICI	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OR District: 01	

Full Name (Last, First, Middle Initial) C. COOPER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address C/O DGLF CPAS & BUSINESS ADVISORS P.O. BOX 198087		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.4327
City NASHVILLE	State TN	
Zip Code 37219	Purpose of Disbursement Contribution	Category/ Type 011
Candidate Name JAMES H.S. COOPER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TN District: 05	

SUBTOTAL of Disbursements This Page (optional).....	3000.00
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 9 OF 15
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BAIRD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DEFAZIO FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address PO BOX 1316		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.4309
City SPRINGFIELD State OR Zip Code 97477	Purpose of Disbursement Contribution 011 Category/Type	
Candidate Name PETER A DEFAZIO	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OR District: 04		

Full Name (Last, First, Middle Initial) B. DELBENE FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2012
Mailing Address PO BOX 487		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.4359
City BOTHELL State WA Zip Code 98041	Purpose of Disbursement Contribution 011 Category/Type	
Candidate Name SUZAN K DELBENE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 01		

Full Name (Last, First, Middle Initial) C. DONNELLY FOR INDIANA		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 1050 17TH ST NW STE 590		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.4345
City WASHINGTON State DC Zip Code 20036	Purpose of Disbursement Contribution 011 Category/Type	
Candidate Name JOSEPH S DONNELLY	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 00		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
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 10 OF 15	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BAIRD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DUCKWORTH FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address P.O. BOX 8867		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.4339
City ROLLING MEADOWS	State IL	
Zip Code 60008	Purpose of Disbursement Contribution	Category/ Type 011
Candidate Name L. TAMMY DUCKWORTH	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IL District: 08	

Full Name (Last, First, Middle Initial) B. FRIENDS OF CHRIS MURPHY		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2012
Mailing Address PO BOX 127		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.4362
City CHESHIRE	State CT	
Zip Code 06410	Purpose of Disbursement Contribution	Category/ Type 011
Candidate Name CHRISTOPHER S MURPHY	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CT District: 00	

Full Name (Last, First, Middle Initial) C. FRIENDS OF CHRIS MURPHY		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address PO BOX 127		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.4373
City CHESHIRE	State CT	
Zip Code 06410	Purpose of Disbursement Contribution	Category/ Type 011
Candidate Name CHRISTOPHER S MURPHY	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CT District: 00	

SUBTOTAL of Disbursements This Page (optional).....	5000.00
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 11 OF 15
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BAIRD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF LOIS CAPPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address P.O. BOX 23940		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.4333
City SANTA BARBARA	State CA	
Zip Code 93121	Purpose of Disbursement Contribution	Category/ Type 011
Candidate Name LOIS CAPPS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 24	

Full Name (Last, First, Middle Initial) B. FRIENDS OF MAZIE HIRONO		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2012
Mailing Address PO BOX 677		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.4366
City HONOLULU	State HI	
Zip Code 96809	Purpose of Disbursement Contribution	Category/ Type 011
Candidate Name MAZIE K HIRONO	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: HI District: 00	

Full Name (Last, First, Middle Initial) C. HEIDI FOR SENATE		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address PO BOX 1577		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.4377
City BISMARCK	State ND	
Zip Code 58502	Purpose of Disbursement Contribution	Category/ Type 011
Candidate Name HEIDI HEITKAMP	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: ND District: 00	

SUBTOTAL of Disbursements This Page (optional).....	5000.00
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 12 OF 15
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BAIRD FOR CONGRESS

A. KIND FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 205 5TH AVENUE SOUTH

City LA CROSSE State WI Zip Code 54601

Purpose of Disbursement Contribution 011 Category/Type

Candidate Name **RON KIND**

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: WI District: 03

Date of Disbursement: 07 / 16 / 2012

Amount of Each Disbursement this Period: 2000.00
Transaction ID : SB21.4348

B. KIND FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 205 5TH AVENUE SOUTH

City LA CROSSE State WI Zip Code 54601

Purpose of Disbursement Contribution 011 Category/Type

Candidate Name **RON KIND**

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: WI District: 03

Date of Disbursement: 07 / 16 / 2012

Amount of Each Disbursement this Period: 2000.00
Transaction ID : SB21.4351

C. KURT SCHRADER FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 3314

City OREGON CITY State OR Zip Code 97045

Purpose of Disbursement Contribution 011 Category/Type

Candidate Name **KURT SCHRADER**

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: OR District: 05

Date of Disbursement: 07 / 16 / 2012

Amount of Each Disbursement this Period: 1000.00
Transaction ID : SB21.4315

SUBTOTAL of Disbursements This Page (optional) 5000.00

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 13 OF 15
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BAIRD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MATHESON FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address P O BOX 521048		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.4330
City SALT LAKE CITY	State UT	
Zip Code 84152	Purpose of Disbursement Contribution	Category/ Type 011
Candidate Name JAMES D MATHESON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: UT District: 04	

Full Name (Last, First, Middle Initial) B. MCNERNEY FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address P.O. BOX 690371		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.4336
City STOCKTON	State CA	
Zip Code 95269	Purpose of Disbursement Contribution	Category/ Type 011
Candidate Name JERRY MCNERNEY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 09	

Full Name (Last, First, Middle Initial) C. MONTANANS FOR TESTER		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address PO BOX 3171		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.4374
City BILLINGS	State MT	
Zip Code 59103	Purpose of Disbursement Contribution	Category/ Type 011
Candidate Name JON TESTER	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MT District: 00	

SUBTOTAL of Disbursements This Page (optional).....	4000.00
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 14 OF 15
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BAIRD FOR CONGRESS

A. PAUL TONKO FOR CONGRESS

Full Name (Last, First, Middle Initial)
PAUL TONKO FOR CONGRESS

Mailing Address 911 CENTRAL AVENUE
PO BOX 221

City ALBANY State NY Zip Code 12206

Purpose of Disbursement Contribution
Category/Type 011

Candidate Name
PAUL DAVID TONKO

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: NY District: 20

Date of Disbursement: 07 / 16 / 2012

Amount of Each Disbursement this Period: 1000.00
Transaction ID : SB21.4324

B. PEOPLE FOR BEN

Full Name (Last, First, Middle Initial)
PEOPLE FOR BEN

Mailing Address PO BOX 31129

City SANTA FE State NM Zip Code 87594

Purpose of Disbursement Contribution
Category/Type 011

Candidate Name
BEN LUJAN

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: NM District: 03

Date of Disbursement: 07 / 16 / 2012

Amount of Each Disbursement this Period: 1000.00
Transaction ID : SB21.4321

c. Senate Democratic Campaign Committee

Full Name (Last, First, Middle Initial)
Senate Democratic Campaign Committee

Mailing Address 123 NW 36th Street, #203

City Seattle State WA Zip Code 98107

Purpose of Disbursement Non-Federal Contribution
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) Other

State: District:

Date of Disbursement: 09 / 25 / 2012

Amount of Each Disbursement this Period: 1000.00
Transaction ID : SB21.4371

SUBTOTAL of Disbursements This Page (optional) 3000.00

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 OF 15	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BAIRD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TAMMY BALDWIN FOR SENATE		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address P.O. BOX 696		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.4342
City MADISON	State WI	
Zip Code 53701	Purpose of Disbursement Contribution	Category/ Type 011
Candidate Name TAMMY BALDWIN	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WI District: 00	

Full Name (Last, First, Middle Initial) B. US Assn of Former Members of Congress		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 1401 K Street, NW, Suite 503		Amount of Each Disbursement this Period 10000.00 Transaction ID : SB21.4352
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Membership dues	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. WASHINGTON STATE DEMOCRATIC CENTRAL COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2012
Mailing Address P O BOX 4027		Amount of Each Disbursement this Period 20000.00 Transaction ID : SB21.4369
City SEATTLE	State WA	
Zip Code 98194	Purpose of Disbursement Unlimited transfer to national party	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	31000.00
TOTAL This Period (last page this line number only).....	63000.00