



## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**ELECT JIM BAIRD FOR CONGRESS**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2025 To: M M / D D / Y Y Y Y 12 / 31 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	55104.77	202249.55
(b) Total Contribution Refunds (from Line 20(d)) .....	300.00	300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	54804.77	201949.55
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	95476.94	283412.57
(b) Total Offsets to Operating Expenditures (from Line 14) .....	450.38	1211.22
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	95026.56	282201.35
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	140677.55	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	210000.00	

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).**

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**ELECT JIM BAIRD FOR CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	18430.72	48894.73
(ii) Unitemized.....	8174.05	40154.82
(iii) TOTAL of contributions from individuals ▶	26604.77	89049.55
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	28500.00	113200.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	55104.77	202249.55
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	450.38	1211.22
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	55555.15	203460.77

**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.....	95476.94	283412.57
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 .....	300.00	300.00
(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)).....	300.00	300.00
21. OTHER DISBURSEMENTS .....	1133.00	1683.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	96909.94	285395.57

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	182032.34
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	55555.15
25. SUBTOTAL (add Line 23 and Line 24).....	237587.49
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	96909.94
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	140677.55

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 82  
(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)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
19TH STAR STATE SOLUTIONS LLC

Mailing Address 1102 N BEVILLE AVE

City INDIANAPOLIS State IN Zip Code 46201

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

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 24 / 2025

Transaction ID : SA11AI.24656

Amount of Each Receipt this Period  
300.00

Memo Item  
REFUNDED ON 12/31/2025

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

Mailing Address 251 H ST NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00797670

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1432.13

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 13 / 2025

Transaction ID : SA11AI.25229

Amount of Each Receipt this Period  
950.00

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

Mailing Address 251 H ST NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00797670

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1456.12

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 20 / 2025

Transaction ID : SA11AI.25230

Amount of Each Receipt this Period  
23.99

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**SUBTOTAL** of Receipts This Page (optional).....▶ 300.00

**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: (check only one)		PAGE 6 OF 82	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>CUNNINGHAM, QUINCY, A, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 12 / 2025	
Mailing Address 203 W VINE ST			<b>Transaction ID : SA11AI.24689</b>	
City DELPHI	State IN	Zip Code 46923	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer INFORMATION REQUESTED		Occupation INFORMATION REQUESTED		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>EVERSON, ROBERT, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 19 / 2025	
Mailing Address 3756 AMHERST DR			<b>Transaction ID : SA11AI.24696</b>	
City LAFAYETTE	State IN	Zip Code 47905	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1050.00		

Full Name (Last, First, Middle Initial) <b>EVERSON, ROBERT, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 19 / 2025	
Mailing Address 3756 AMHERST DR			<b>Transaction ID : SA11AI.24697</b>	
City LAFAYETTE	State IN	Zip Code 47905	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1100.00		

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3550.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	3550.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
GHOMAN, HIMMAT, SINGH, ,

Mailing Address 13147 W SHERBERN DR

City CARMEL State IN Zip Code 46032

FEC ID number of contributing federal political committee. C

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 24 / 2025

Transaction ID : SA11AI.24706

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
GUTTMAN, CYNTHIA, , ,

Mailing Address 12404 HAUTREE COURT

City PALM BEACH State FL Zip Code 33418

FEC ID number of contributing federal political committee. C

Name of Employer SELF Occupation HOMEMAKER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 13 / 2025

Transaction ID : SA11AI.25154

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
JOURNAY, JUSTIN, , ,

Mailing Address 8500 E 116TH ST  
UNIT 443

City FISHERS State IN Zip Code 46038

FEC ID number of contributing federal political committee. C

Name of Employer SELF-EMPLOYED Occupation CEO

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 11 / 2025

Transaction ID : SA11AI.25149

Amount of Each Receipt this Period  
2500.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.21588]

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

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

6000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
LUKOWSKI, JAN, A, ,

Mailing Address 51 S 400 W

City MOROCCO State IN Zip Code 47963

FEC ID number of contributing federal political committee. C

Name of Employer SELF-EMPLOYED Occupation LABOR

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
205.75

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 22 / 2025

Transaction ID : SA11AI.24741

Amount of Each Receipt this Period  
35.47

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
MCCLELLAN, JACOB, , ,

Mailing Address 5788 S 675 W

City NEW PALESTINE State IN Zip Code 46163

FEC ID number of contributing federal political committee. C

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 12 / 2025

Transaction ID : SA11AI.24745

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
MESSER, ALLEN, , ,

Mailing Address 202 E 71ST ST

City INDIANAPOLIS State IN Zip Code 46220

FEC ID number of contributing federal political committee. C

Name of Employer BOSE MCKINNEYLAW Occupation LAWYER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 10 / 2025

Transaction ID : SA11AI.25148

Amount of Each Receipt this Period  
1000.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.21587]

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1285.47

**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: (check only one)		PAGE 9 OF 82	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
MOORE, WILLIAM, H, ,

Mailing Address 117 HILLCREST ROAD

City RALEIGH	State NC	Zip Code 27605
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FEC ID number of contributing federal political committee.

Name of Employer RETIRED	Occupation RETIRED
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Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.24753**

Amount of Each Receipt this Period

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
MOSS, LINDSEY, , ,

Mailing Address 1102 N BEVILLE AVE

City INDIANAPOLIS	State IN	Zip Code 46201
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FEC ID number of contributing federal political committee.

Name of Employer BOSE PUBLIC AFFAIRS GROUP	Occupation PRINCIPAL
---	-------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.25151**

Amount of Each Receipt this Period

Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.21588]

**C.** Full Name (Last, First, Middle Initial)  
OBST, MARTIN, , ,

Mailing Address 105 BERKLEY RD

City INDIANAPOLIS	State IN	Zip Code 46208
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FEC ID number of contributing federal political committee.

Name of Employer MO STRATEGIES INC	Occupation CONSULTANT
---------------------------------------	--------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.25175**

Amount of Each Receipt this Period

Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.21598]

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	<input type="text" value="3260.25"/>
<b>TOTAL</b> This Period (last page this line number only)..... ▶	<input type="text" value=""/>

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
SMITH, VICTOR, P, ,

Mailing Address 775 WILLIAMS COVE DR

City INDIANAPOLIS State IN Zip Code 46260

FEC ID number of contributing federal political committee. C

Name of Employer BOSE MCKINNEY EVANS Occupation LAW PARTNER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 12 / 2025

Transaction ID : SA11AI.25152

Amount of Each Receipt this Period  
3500.00

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.21588]

**B.** Full Name (Last, First, Middle Initial)  
STEPHENS, GREGORY, A, ,

Mailing Address 411 PEBBLE CT

City RUSSIAVILLE State IN Zip Code 46979

FEC ID number of contributing federal political committee. C

Name of Employer STEPHENS MACHINE INC Occupation OWNER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
285.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2025

Transaction ID : SA11AI.25117

Amount of Each Receipt this Period  
285.00

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.21582]

**C.** Full Name (Last, First, Middle Initial)  
TERNET, GREGORY, , ,

Mailing Address 1109 JUDITH LN

City DANVILLE State IN Zip Code 46122

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 24 / 2025

Transaction ID : SA11AI.24790

Amount of Each Receipt this Period  
250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4035.00

**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: (check only one)		PAGE 11 OF 82	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer	Occupation
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Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
14367.45

Date of Receipt  

M M / D D / Y Y Y Y Y Y
10 / 07 / 2025

**Transaction ID : SA11AI.25208**

Amount of Each Receipt this Period  

0.91
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Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
14463.51

Date of Receipt  

M M / D D / Y Y Y Y Y Y
10 / 09 / 2025

**Transaction ID : SA11AI.25209**

Amount of Each Receipt this Period  

96.06
-------

Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
14486.32

Date of Receipt  

M M / D D / Y Y Y Y Y Y
10 / 16 / 2025

**Transaction ID : SA11AI.25210**

Amount of Each Receipt this Period  

22.81
-------

Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
14487.94

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 20 2025

Transaction ID : SA11AI.25211

Amount of Each Receipt this Period  
1.62

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
14497.53

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 20 2025

Transaction ID : SA11AI.25212

Amount of Each Receipt this Period  
9.59

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
14498.11

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 21 2025

Transaction ID : SA11AI.25213

Amount of Each Receipt this Period  
0.58

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

**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 13 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
14499.40

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 22 / 2025

Transaction ID : SA11AI.25214

Amount of Each Receipt this Period  
1.29

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
14508.59

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 24 / 2025

Transaction ID : SA11AI.25215

Amount of Each Receipt this Period  
9.19

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
14742.19

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 27 / 2025

Transaction ID : SA11AI.25216

Amount of Each Receipt this Period  
233.60

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 14 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
14819.05

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 28 2025

Transaction ID : SA11AI.25217

Amount of Each Receipt this Period  
76.86

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
14869.04

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 29 2025

Transaction ID : SA11AI.25218

Amount of Each Receipt this Period  
49.99

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
14896.60

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 30 2025

Transaction ID : SA11AI.25219

Amount of Each Receipt this Period  
27.56

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
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Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
14897.36

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 31 2025

Transaction ID : SA11AI.25220

Amount of Each Receipt this Period  
0.76

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15212.64

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 03 2025

Transaction ID : SA11AI.25221

Amount of Each Receipt this Period  
315.28

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15291.25

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 04 2025

Transaction ID : SA11AI.25222

Amount of Each Receipt this Period  
78.61

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

**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 16 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15309.64

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2025

**Transaction ID : SA11AI.25223**

Amount of Each Receipt this Period  
18.39

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15309.89

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2025

**Transaction ID : SA11AI.25224**

Amount of Each Receipt this Period  
0.25

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15330.33

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 07 / 2025

**Transaction ID : SA11AI.25225**

Amount of Each Receipt this Period  
20.44

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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**A.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
16290.93

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 13 2025

Transaction ID : SA11AI.25226

Amount of Each Receipt this Period  
960.60

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
22327.34

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 14 2025

Transaction ID : SA11AI.25227

Amount of Each Receipt this Period  
6036.41

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
22336.93

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 19 2025

Transaction ID : SA11AI.25228

Amount of Each Receipt this Period  
9.59

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
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**A.** Full Name (Last, First, Middle Initial)  
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Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
22389.37

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 26 / 2025

Transaction ID : SA11AI.25231

Amount of Each Receipt this Period  
52.44

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
22389.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 28 / 2025

Transaction ID : SA11AI.25232

Amount of Each Receipt this Period  
0.11

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
22412.29

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 02 / 2025

Transaction ID : SA11AI.25233

Amount of Each Receipt this Period  
22.81

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 19 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
22444.23

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 03 / 2025

Transaction ID : SA11AI.25234

Amount of Each Receipt this Period  
31.94

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
22445.14

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 05 / 2025

Transaction ID : SA11AI.25235

Amount of Each Receipt this Period  
0.91

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
22463.39

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 10 / 2025

Transaction ID : SA11AI.25236

Amount of Each Receipt this Period  
18.25

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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: (check only one)	PAGE 20 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
22486.20

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 15 / 2025

Transaction ID : SA11AI.25237

Amount of Each Receipt this Period  
22.81

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
22495.79

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 18 / 2025

Transaction ID : SA11AI.25238

Amount of Each Receipt this Period  
9.59

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
24402.26

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 23 / 2025

Transaction ID : SA11AI.25239

Amount of Each Receipt this Period  
1906.47

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	0.00
<b>TOTAL</b> 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 21 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
24411.39

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 24 2025

Transaction ID : SA11AI.25242

Amount of Each Receipt this Period  
9.13

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
24415.95

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 26 2025

Transaction ID : SA11AI.25240

Amount of Each Receipt this Period  
4.56

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
24423.75

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 29 2025

Transaction ID : SA11AI.25241

Amount of Each Receipt this Period  
7.80

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 22 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
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**A.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
24446.56

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 31 2025

Transaction ID : SA11AI.25243

Amount of Each Receipt this Period  
22.81

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
24458.83

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 31 2025

Transaction ID : SA11AI.25244

Amount of Each Receipt this Period  
12.27

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
24462.92

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 31 2025

Transaction ID : SA11AI.25245

Amount of Each Receipt this Period  
4.09

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	18430.72

# 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 23 OF 82	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION OF CROP INSURERS PAC**

Mailing Address 1701 PENNSYLVANIA AVE, NW  
SUITE 200

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00172833

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 09 / 2025

**Transaction ID : SA11C.25193**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**

Mailing Address 1120 CONNECTICUT AVE NW  
STE 600

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2025

**Transaction ID : SA11C.25194**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**

Mailing Address 1120 CONNECTICUT AVE NW  
STE 600

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 26 / 2025

**Transaction ID : SA11C.25195**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<b>TOTAL</b> 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 24 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOYBEAN ASSOCIATION PAC (SOYPAC)**

Mailing Address 12647 OLIVE BLVD  
STE 410

City SAINT LOUIS State MO Zip Code 63141

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

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2025

**Transaction ID : SA11C.25196**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BARNES & THORNBURG POLITICAL ACTION COMMITTEE**

Mailing Address 11 SOUTH MERIDIAN STREET

City INDIANAPOLIS State IN Zip Code 46204

FEC ID number of contributing federal political committee. **C** C00395947

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 10 / 2025

**Transaction ID : SA11C.25197**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BOSE PUBLIC AFFAIRS GROUP LLC/BOSE MCKINNEY & EVANS LLP PAC**

Mailing Address 111 MONUMENT CIRCLE  
SUITE 2700

City INDIANAPOLIS State IN Zip Code 46204

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

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 24 / 2025

**Transaction ID : SA11C.25183**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

4000.00

# 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 25 OF 82	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
COVESTROPAC A POLITICAL ACTION COMMITTEE OF COVESTRO LLC

Mailing Address 1 COVESTRO CIRCLE

City PITTSBURGH	State PA	Zip Code 15205
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11C.25184**

Amount of Each Receipt this Period

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
DEERE & COMPANY PAC (AKA JOHN DEERE PAC)

Mailing Address ONE JOHN DEERE PLACE

City MOLINE	State IL	Zip Code 61265
----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11C.25185**

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
ELEVANCE HEALTH, INC. POLITICAL ACTION COMMITTEE (ELEVANCE HEALTH PAC)

Mailing Address 1001 PENNSYLVANIA AVENUE, NW  
SUITE 710

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11C.25201**

Amount of Each Receipt this Period

Memo Item

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

**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 26 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Mailing Address LILLY CORPORATE CENTER

City INDIANAPOLIS State IN Zip Code 46285

FEC ID number of contributing federal political committee. **C** C00082792

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2025

Transaction ID : SA11C.25198

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 CONSTITUTION AVE. NW  
SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 26 / 2025

Transaction ID : SA11C.25186

Amount of Each Receipt this Period  
2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
INDIANA ACRE/INDIANA STATEWIDE ASSOCIATION OF RURAL ELECTRIC COOPERATIVES DBA INDIANA ELECTRIC COOPERATIVES FEDERAL PAC

Mailing Address 8888 KEYSTONE CROSSING  
SUITE 1600

City INDIANAPOLIS State IN Zip Code 46240

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

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 24 / 2025

Transaction ID : SA11C.25187

Amount of Each Receipt this Period  
4000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 7000.00

**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 27 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 2121 CRYSTAL DR  
STE 100

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 26 / 2025

Transaction ID : SA11C.25199

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
MNM PAC

Mailing Address 28 W 3RD ST

City LITCHFIELD State MN Zip Code 55355

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 15 / 2025

Transaction ID : SA11C.25188

Amount of Each Receipt this Period  
2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
RAPTOR PAC

Mailing Address PO BOX 4864

City MIDLAND State TX Zip Code 79704

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 29 / 2025

Transaction ID : SA11C.25189

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

4000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SEAL PAC SUPPORTING ELECTING AMERICAN LEADERS PAC**

Mailing Address **824 S MILLEDGE AVE**  
**STE 101**

City **ATHENS** State **GA** Zip Code **30605**

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

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**1000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**12 / 09 / 2025**

**Transaction ID : SA11C.25190**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**THE FARM CREDIT COUNCIL POLITICAL ACTION COMMITTEE**

Mailing Address **50 F STREET NW**  
**SUITE 900**

City **WASHINGTON** State **DC** Zip Code **20001-1530**

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

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**2500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**12 / 23 / 2025**

**Transaction ID : SA11C.25191**

Amount of Each Receipt this Period  
**2500.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**TYSON FOODS INC POLITICAL ACTION COMMITTEE (TYPAC)**

Mailing Address **1000 F ST. NW**

City **WASHINGTON** State **DC** Zip Code **20004**

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

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**2500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 04 / 2025**

**Transaction ID : SA11C.25192**

Amount of Each Receipt this Period  
**2500.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **6000.00**

**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 29 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
WALMART INC. PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 SW 8TH ST

City BENTONVILLE State AR Zip Code 72716

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2025

Transaction ID : SA11C.25200

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)

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

**C.** Full Name (Last, First, Middle Initial)

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	28500.00

# 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)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN AIRLINES

Mailing Address 4333 AMON CATER BLVD

City FORT WORTH State TX Zip Code 76155

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 21 / 2025

Transaction ID : SA14.25202

Amount of Each Receipt this Period

Memo Item  
VENDOR REFUND: OVERPAYMENT

**B.** Full Name (Last, First, Middle Initial)  
BETTER MOUSETRAP DIGITAL

Mailing Address 17 FRYDENDAHL EE

City ST THOMAS State VI Zip Code 00802

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 23 / 2025

Transaction ID : SA14.25203

Amount of Each Receipt this Period

Memo Item  
VENDOR REFUND: OVERPAYMENT

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="440.51"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="440.51"/>

# 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 31 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2025	
Mailing Address 4333 AMON CATER BLVD			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 621.97	
Purpose of Disbursement TRAVEL: AIR			Transaction ID : SB17.24501	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2025	
Mailing Address 4333 AMON CATER BLVD			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 890.97	
Purpose of Disbursement TRAVEL: AIR			Transaction ID : SB17.24503	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2025	
Mailing Address 4333 AMON CATER BLVD			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 446.48	
Purpose of Disbursement TRAVEL: AIR			Transaction ID : SB17.24514	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1959.42
<b>TOTAL</b> 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 32 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ASCENT STRATEGIC INC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2025
Mailing Address 5382 N HIGHWAY 36		FEC Identification Number C
City ERDA	State UT	Zip Code 84074
Purpose of Disbursement STRATEGY CONSULTING		Amount of Each Disbursement this Period 12500.00
Candidate Name		Transaction ID : SB17.24473
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T STORE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2025
Mailing Address 1748 INDIANAPOLIS ROAD		FEC Identification Number C
City GREENCASTLE	State IN	Zip Code 46135
Purpose of Disbursement MOBILE PHONE EXPENSE		Amount of Each Disbursement this Period 1448.19
Candidate Name		Transaction ID : SB17.24601
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BAIRD, STACEY, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2025
Mailing Address 6390 WYANDOTTE ROAD		FEC Identification Number C
City LAFAYETTE	State IN	Zip Code 47905
Purpose of Disbursement BAIRD REIMBURSEMENT: SEE MEMO ENTRIES		Amount of Each Disbursement this Period 636.00
Candidate Name		Transaction ID : SB17.24595
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	14584.19
<b>TOTAL</b> 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 33 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BETTER MOUSETRAP DIGITAL</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2025	
Mailing Address 17 FRYDENDAHL EE			FEC Identification Number C	
City ST THOMAS	State VI	Zip Code 00802	Amount of Each Disbursement this Period 33.98	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24526	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. BETTER MOUSETRAP DIGITAL</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2025	
Mailing Address 17 FRYDENDAHL EE			FEC Identification Number C	
City ST THOMAS	State VI	Zip Code 00802	Amount of Each Disbursement this Period 938.47	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24535	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. BETTER MOUSETRAP DIGITAL</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2025	
Mailing Address 17 FRYDENDAHL EE			FEC Identification Number C	
City ST THOMAS	State VI	Zip Code 00802	Amount of Each Disbursement this Period 1499.81	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24538	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2472.26
<b>TOTAL</b> 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 34 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BETTER MOUSETRAP DIGITAL</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2025	
Mailing Address 17 FRYDENDAHL EE			FEC Identification Number C	
City ST THOMAS	State VI	Zip Code 00802	Amount of Each Disbursement this Period 90.31	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24543	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. BETTER MOUSETRAP DIGITAL</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2025	
Mailing Address 17 FRYDENDAHL EE			FEC Identification Number C	
City ST THOMAS	State VI	Zip Code 00802	Amount of Each Disbursement this Period 27.06	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24546	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. BETTER MOUSETRAP DIGITAL</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2025	
Mailing Address 17 FRYDENDAHL EE			FEC Identification Number C	
City ST THOMAS	State VI	Zip Code 00802	Amount of Each Disbursement this Period 67.68	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24550	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	185.05
<b>TOTAL</b> 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 35 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BETTER MOUSETRAP DIGITAL</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025	
Mailing Address 17 FRYDENDAHL EE			FEC Identification Number C	
City ST THOMAS	State VI	Zip Code 00802	Amount of Each Disbursement this Period 474.63	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24554	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. BETTER MOUSETRAP DIGITAL</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2025	
Mailing Address 17 FRYDENDAHL EE			FEC Identification Number C	
City ST THOMAS	State VI	Zip Code 00802	Amount of Each Disbursement this Period 90.46	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24558	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. BETTER MOUSETRAP DIGITAL</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2025	
Mailing Address 17 FRYDENDAHL EE			FEC Identification Number C	
City ST THOMAS	State VI	Zip Code 00802	Amount of Each Disbursement this Period 4.51	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24608	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	569.60
<b>TOTAL</b> 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 36 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**A. BETTER MOUSETRAP DIGITAL**

Mailing Address 17 FRYDENDAHL EE

City ST THOMAS State VI Zip Code 00802

Purpose of Disbursement FUNDRAISING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2026  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 28 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 9.02

Transaction ID : SB17.24610

Memo Item

Full Name (Last, First, Middle Initial)  
**B. CAKE BAKE SHOP**

Mailing Address 6515 CARROLLTON AVE

City INDIANAPOLIS State IN Zip Code 46220

Purpose of Disbursement EVENT EXPENSE: CATERING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2026  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 10 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 216.91

Transaction ID : SB17.24584

Memo Item

Full Name (Last, First, Middle Initial)  
**C. CAMPAIGN ENGINE**

Mailing Address 161 CENTER GROVE RD  
BOX 217

City RANDOLPH State NJ Zip Code 07869

Purpose of Disbursement CAMPAIGN CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2026  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 06 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 4500.00

Transaction ID : SB17.24492

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 4725.93

**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 37 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CAMPAIGN ENGINE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2025	
Mailing Address 161 CENTER GROVE RD BOX 217			FEC Identification Number C	
City RANDOLPH	State NJ	Zip Code 07869	Amount of Each Disbursement this Period 4500.00	
Purpose of Disbursement CAMPAIGN CONSULTING		Category/ Type	Transaction ID : SB17.24482	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CAMPAIGN ENGINE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2025	
Mailing Address 161 CENTER GROVE RD BOX 217			FEC Identification Number C	
City RANDOLPH	State NJ	Zip Code 07869	Amount of Each Disbursement this Period 4500.00	
Purpose of Disbursement CAMPAIGN CONSULTING		Category/ Type	Transaction ID : SB17.24483	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. CAMPAIGN ENGINE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2025	
Mailing Address 161 CENTER GROVE RD BOX 217			FEC Identification Number C	
City RANDOLPH	State NJ	Zip Code 07869	Amount of Each Disbursement this Period 42.76	
Purpose of Disbursement TEXT MESSAGES		Category/ Type	Transaction ID : SB17.24497	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9042.76
<b>TOTAL</b> 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 38 OF 82			
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CAMPAIGN ENGINE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2025		
Mailing Address 161 CENTER GROVE RD BOX 217			FEC Identification Number C		
City RANDOLPH	State NJ	Zip Code 07869	Amount of Each Disbursement this Period 0.18		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24509		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. CAMPAIGN ENGINE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2025		
Mailing Address 161 CENTER GROVE RD BOX 217			FEC Identification Number C		
City RANDOLPH	State NJ	Zip Code 07869	Amount of Each Disbursement this Period 1.42		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24534		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. CAMPAIGN ENGINE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2025		
Mailing Address 161 CENTER GROVE RD BOX 217			FEC Identification Number C		
City RANDOLPH	State NJ	Zip Code 07869	Amount of Each Disbursement this Period 5.13		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24542		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6.73
<b>TOTAL</b> 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 39 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CAMPAIGN ENGINE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2025	
Mailing Address 161 CENTER GROVE RD BOX 217			FEC Identification Number C	
City RANDOLPH	State NJ	Zip Code 07869	Amount of Each Disbursement this Period 0.47	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24545	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CAMPAIGN ENGINE</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025	
Mailing Address 161 CENTER GROVE RD BOX 217			FEC Identification Number C	
City RANDOLPH	State NJ	Zip Code 07869	Amount of Each Disbursement this Period 36.77	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24553	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. CAMPAIGN ENGINE</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2025	
Mailing Address 161 CENTER GROVE RD BOX 217			FEC Identification Number C	
City RANDOLPH	State NJ	Zip Code 07869	Amount of Each Disbursement this Period 46.75	
Purpose of Disbursement TEXT MESSAGES		Category/ Type	Transaction ID : SB17.24474	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	83.99
<b>TOTAL</b> 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 40 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CAMPAIGN ENGINE</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2025	
Mailing Address 161 CENTER GROVE RD BOX 217			FEC Identification Number C	
City RANDOLPH	State NJ	Zip Code 07869	Amount of Each Disbursement this Period 1.62	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24557	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CAMPAIGN ENGINE</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2025	
Mailing Address 161 CENTER GROVE RD BOX 217			FEC Identification Number C	
City RANDOLPH	State NJ	Zip Code 07869	Amount of Each Disbursement this Period 1.99	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24564	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. CAMPAIGN ENGINE</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2025	
Mailing Address 161 CENTER GROVE RD BOX 217			FEC Identification Number C	
City RANDOLPH	State NJ	Zip Code 07869	Amount of Each Disbursement this Period 0.04	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24567	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3.65
<b>TOTAL</b> 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 41 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CAMPAIGN ENGINE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2025
Mailing Address 161 CENTER GROVE RD BOX 217		FEC Identification Number C
City RANDOLPH	State NJ	Zip Code 07869
Purpose of Disbursement FUNDRAISING FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 2.37	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.24575
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CAMPAIGN ENGINE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2025
Mailing Address 161 CENTER GROVE RD BOX 217		FEC Identification Number C
City RANDOLPH	State NJ	Zip Code 07869
Purpose of Disbursement CAMPAIGN CONSULTING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 4500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.24480
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CAMPAIGN ENGINE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2025
Mailing Address 161 CENTER GROVE RD BOX 217		FEC Identification Number C
City RANDOLPH	State NJ	Zip Code 07869
Purpose of Disbursement CAMPAIGN CONSULTING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 4500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.24481
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9002.37
<b>TOTAL</b> 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 42 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CAMPAIGN ENGINE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2025
Mailing Address 161 CENTER GROVE RD BOX 217		FEC Identification Number C
City RANDOLPH	State NJ	Zip Code 07869
Purpose of Disbursement CAMPAIGN CONSULTING		Amount of Each Disbursement this Period 4500.00
Candidate Name		Transaction ID : SB17.24578
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2025
Mailing Address 300 FIRST STREET, SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement MEETING EXPENSE: MEALS		Amount of Each Disbursement this Period 708.33
Candidate Name		Transaction ID : SB17.24510
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CASEY'S</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025
Mailing Address 1215 S BLOOMINGTON ST		FEC Identification Number C
City GREENCASTLE	State IN	Zip Code 46135
Purpose of Disbursement TRAVEL: MEALS		Amount of Each Disbursement this Period 94.15
Candidate Name		Transaction ID : SB17.24562
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5302.48
<b>TOTAL</b> 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 43 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CASEY'S</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2025
Mailing Address 1215 S BLOOMINGTON ST		FEC Identification Number C
City GREENCASTLE	State IN	Zip Code 46135
Purpose of Disbursement TRAVEL: MEALS		Amount of Each Disbursement this Period 15.51
Candidate Name		Transaction ID : SB17.24577
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CASEY'S</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2025
Mailing Address 1215 S BLOOMINGTON ST		FEC Identification Number C
City GREENCASTLE	State IN	Zip Code 46135
Purpose of Disbursement TRAVEL: MEALS		Amount of Each Disbursement this Period 65.16
Candidate Name		Transaction ID : SB17.24593
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CONVERSION CREATIVE INC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2025
Mailing Address 5382 N HIGHWAY 36		FEC Identification Number C
City ERDA	State UT	Zip Code 84074
Purpose of Disbursement DIGITAL CONSULTING		Amount of Each Disbursement this Period 650.00
Candidate Name		Transaction ID : SB17.24479
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	730.67
<b>TOTAL</b> 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 44 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. COSTCO</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2025
Mailing Address 8816 DR. CHARLES NELSON DRIVE		FEC Identification Number C
City AVON	State IN	Zip Code 46123
Purpose of Disbursement TRAVEL: FUEL		Amount of Each Disbursement this Period 76.60
Candidate Name		Transaction ID : SB17.24488
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. COSTCO</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2025
Mailing Address 8816 DR. CHARLES NELSON DRIVE		FEC Identification Number C
City AVON	State IN	Zip Code 46123
Purpose of Disbursement TRAVEL: FUEL		Amount of Each Disbursement this Period 63.63
Candidate Name		Transaction ID : SB17.24527
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. COSTCO</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2025
Mailing Address 8816 DR. CHARLES NELSON DRIVE		FEC Identification Number C
City AVON	State IN	Zip Code 46123
Purpose of Disbursement TRAVEL: FUEL		Amount of Each Disbursement this Period 74.69
Candidate Name		Transaction ID : SB17.24548
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	214.92
<b>TOTAL</b> 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 45 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. COSTCO</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2025
Mailing Address 8816 DR. CHARLES NELSON DRIVE		FEC Identification Number C
City AVON	State IN	Zip Code 46123
Purpose of Disbursement TRAVEL: FUEL		Amount of Each Disbursement this Period 77.20
Candidate Name		Transaction ID : SB17.24569
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. COSTCO</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2025
Mailing Address 8816 DR. CHARLES NELSON DRIVE		FEC Identification Number C
City AVON	State IN	Zip Code 46123
Purpose of Disbursement OFFICE SUPPLIES		Amount of Each Disbursement this Period 349.48
Candidate Name		Transaction ID : SB17.24579
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. COSTCO</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2025
Mailing Address 8816 DR. CHARLES NELSON DRIVE		FEC Identification Number C
City AVON	State IN	Zip Code 46123
Purpose of Disbursement TRAVEL: FUEL		Amount of Each Disbursement this Period 80.79
Candidate Name		Transaction ID : SB17.24583
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	507.47
<b>TOTAL</b> 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 46 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. COSTCO</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2025
Mailing Address 8816 DR. CHARLES NELSON DRIVE		FEC Identification Number C
City AVON	State IN	Zip Code 46123
Purpose of Disbursement OFFICE SUPPLIES		Amount of Each Disbursement this Period 160.49
Candidate Name		Transaction ID : SB17.24636
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CREW CARWASH</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2025
Mailing Address 10251 HAGUE ROAD		FEC Identification Number C
City INDIANAPOLIS	State IN	Zip Code 46256
Purpose of Disbursement SUBSCRIPTION		Amount of Each Disbursement this Period 39.99
Candidate Name		Transaction ID : SB17.24502
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CREW CARWASH</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2025
Mailing Address 10251 HAGUE ROAD		FEC Identification Number C
City INDIANAPOLIS	State IN	Zip Code 46256
Purpose of Disbursement SUBSCRIPTION		Amount of Each Disbursement this Period 39.99
Candidate Name		Transaction ID : SB17.24623
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	240.47
<b>TOTAL</b> 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)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**A. DEMOCRACY ENGINE, LLC**

Mailing Address 416 FLORIDA AVE NW #26416

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 13 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
50.00

Transaction ID : SB17.24605

Memo Item

Full Name (Last, First, Middle Initial)  
**B. DEMOCRACY ENGINE, LLC**

Mailing Address 416 FLORIDA AVE NW #26416

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 20 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
1.27

Transaction ID : SB17.24606

Memo Item

Full Name (Last, First, Middle Initial)  
**C. DIRECT MAIL PROCESSORS INC**

Mailing Address 1150 CONRAD COURT

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement  
DIRECT MAIL

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
12 / 31 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
2153.83

Transaction ID : SB17.24644

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 2205.10

**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 48 OF 82			
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. DUKE ENERGY</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2025		
Mailing Address 2727 CENTRAL AVE			FEC Identification Number C		
City COLUMBUS	State IN	Zip Code 47201	Amount of Each Disbursement this Period 411.00		
Purpose of Disbursement UTILITIES		Category/ Type	Transaction ID : SB17.24651		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. DUKE ENERGY</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2025		
Mailing Address 2727 CENTRAL AVE			FEC Identification Number C		
City COLUMBUS	State IN	Zip Code 47201	Amount of Each Disbursement this Period 228.89		
Purpose of Disbursement UTILITIES		Category/ Type	Transaction ID : SB17.24611		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. FORD MOTOR</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2025		
Mailing Address ONE AMERICAN ROAD			FEC Identification Number C		
City DEARBORN	State MI	Zip Code 48126	Amount of Each Disbursement this Period 1144.87		
Purpose of Disbursement CAMPAIGN VEHICLE LEASE		Category/ Type	Transaction ID : SB17.24491		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1373.76
<b>TOTAL</b> 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 49 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FORD MOTOR</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2025
Mailing Address ONE AMERICAN ROAD		FEC Identification Number C
City DEARBORN	State MI	Zip Code 48126
Purpose of Disbursement CAMPAIGN VEHICLE LEASE		Amount of Each Disbursement this Period 1194.87
Candidate Name		Transaction ID : SB17.24599
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FORD MOTOR</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2025
Mailing Address ONE AMERICAN ROAD		FEC Identification Number C
City DEARBORN	State MI	Zip Code 48126
Purpose of Disbursement CAMPAIGN VEHICLE LEASE		Amount of Each Disbursement this Period 1194.87
Candidate Name		Transaction ID : SB17.24617
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FRONTLINE STRATEGIES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2025
Mailing Address 4 HOLLY LN		FEC Identification Number C
City MOHNTON	State PA	Zip Code 19540
Purpose of Disbursement FUNDRAISING FEES		Amount of Each Disbursement this Period 7.60
Candidate Name		Transaction ID : SB17.24487
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2397.34
<b>TOTAL</b> 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 50 OF 82			
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FULFILLMENT SOLUTIONS INC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2025
Mailing Address 44970 FALCON PLACE SUITE 400			FEC Identification Number C
City STERLING	State VA	Zip Code 20166	Amount of Each Disbursement this Period 1019.34
Purpose of Disbursement POSTAGE & DELIVERY SERVICES		Category/ Type	Transaction ID : SB17.24645
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. FUNDRAISING, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2025
Mailing Address 800 W 47TH ST. STE 200			FEC Identification Number C
City KANSAS CITY	State MO	Zip Code 64112	Amount of Each Disbursement this Period 13401.67
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	Transaction ID : SB17.24472
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. GOOGLE INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2025
Mailing Address 1600 AMPHITHEATRE PARKWAY			FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043	Amount of Each Disbursement this Period 12.94
Purpose of Disbursement SUBSCRIPTION		Category/ Type	Transaction ID : SB17.24489
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	14433.95
<b>TOTAL</b> 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)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**A. GOOGLE INC.**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW    State CA    Zip Code 94043

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:  House     Senate     President  
Disbursement For: 2026  
 Primary     General  
 Other (specify) ▼

State:    District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 02 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
57.60

Transaction ID : SB17.24490

Memo Item

Full Name (Last, First, Middle Initial)  
**B. GOOGLE INC.**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW    State CA    Zip Code 94043

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:  House     Senate     President  
Disbursement For: 2026  
 Primary     General  
 Other (specify) ▼

State:    District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 03 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
13.02

Transaction ID : SB17.24560

Memo Item

Full Name (Last, First, Middle Initial)  
**C. GOOGLE INC.**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW    State CA    Zip Code 94043

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:  House     Senate     President  
Disbursement For: 2026  
 Primary     General  
 Other (specify) ▼

State:    District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 03 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
57.60

Transaction ID : SB17.24561

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	128.22
<b>TOTAL</b> 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 52 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. GOOGLE INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2025	
Mailing Address 1600 AMPHITHEATRE PARKWAY			FEC Identification Number C	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Amount of Each Disbursement this Period 57.60	
Purpose of Disbursement SUBSCRIPTION		Category/ Type	Transaction ID : SB17.24614	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. GOOGLE INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2025	
Mailing Address 1600 AMPHITHEATRE PARKWAY			FEC Identification Number C	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Amount of Each Disbursement this Period 13.02	
Purpose of Disbursement SUBSCRIPTION		Category/ Type	Transaction ID : SB17.24616	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. INDIANA MAGIC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2025	
Mailing Address 4894 S COUNTY ROAD 150 E			FEC Identification Number C	
City LAFAYETTE	State IN	Zip Code 47909	Amount of Each Disbursement this Period 111.00	
Purpose of Disbursement SPONSORSHIP		Category/ Type	Transaction ID : SB17.24653	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	70.62
<b>TOTAL</b> 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 53 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. JAMES COLE ELEMENTARY</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2025
Mailing Address 6418 E 900 S		FEC Identification Number C
City LAFAYETTE	State IN	Zip Code 47909
Purpose of Disbursement SPONSORSHIP	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 114.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.24655 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. KROGER</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2025
Mailing Address 821 INDIANAPOLIS RD		FEC Identification Number C
City GREENCASTLE	State IN	Zip Code 46135
Purpose of Disbursement TRAVEL: FUEL	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 141.16	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.24496 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. KROGER</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2025
Mailing Address 821 INDIANAPOLIS RD		FEC Identification Number C
City GREENCASTLE	State IN	Zip Code 46135
Purpose of Disbursement TRAVEL: FUEL	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 45.48	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.24506 <input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	186.64
<b>TOTAL</b> 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 54 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. MAILCHIMP</b>		M M / D D / Y Y Y Y 10 / 06 / 2025
Mailing Address 675 PONCE DE LEON AVENUE, NORTHEAS		FEC Identification Number
City ATLANTA	State GA	Zip Code 30308
Purpose of Disbursement SUBSCRIPTIONS	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026	993.00
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : SB17.24494</b>
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. MAILCHIMP</b>		M M / D D / Y Y Y Y 11 / 05 / 2025
Mailing Address 675 PONCE DE LEON AVENUE, NORTHEAS		FEC Identification Number
City ATLANTA	State GA	Zip Code 30308
Purpose of Disbursement SUBSCRIPTIONS	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026	1012.00
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : SB17.24570</b>
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. MAILCHIMP</b>		M M / D D / Y Y Y Y 12 / 04 / 2025
Mailing Address 675 PONCE DE LEON AVENUE, NORTHEAS		FEC Identification Number
City ATLANTA	State GA	Zip Code 30308
Purpose of Disbursement SUBSCRIPTIONS	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026	1012.00
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : SB17.24621</b>
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3017.00
<b>TOTAL</b> 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 55 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MIDDLETOWN VALLEY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2025
Mailing Address 1101 PROFESSIONAL COURT		FEC Identification Number C
City HAGERSTOWN	State MD	Zip Code 21740
Purpose of Disbursement BANK FEES		Amount of Each Disbursement this Period 43.00
Candidate Name		Transaction ID : SB17.24596
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MIDDLETOWN VALLEY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2025
Mailing Address 1101 PROFESSIONAL COURT		FEC Identification Number C
City HAGERSTOWN	State MD	Zip Code 21740
Purpose of Disbursement BANK FEES		Amount of Each Disbursement this Period 38.95
Candidate Name		Transaction ID : SB17.24597
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MIDDLETOWN VALLEY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2025
Mailing Address 1101 PROFESSIONAL COURT		FEC Identification Number C
City HAGERSTOWN	State MD	Zip Code 21740
Purpose of Disbursement BANK FEES		Amount of Each Disbursement this Period 50.00
Candidate Name		Transaction ID : SB17.24500
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	131.95
<b>TOTAL</b> 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 56 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MIDDLETOWN VALLEY BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025	
Mailing Address 1101 PROFESSIONAL COURT			FEC Identification Number C	
City HAGERSTOWN	State MD	Zip Code 21740	Amount of Each Disbursement this Period 181.45	
Purpose of Disbursement BANK FEES		Category/ Type	Transaction ID : SB17.24618	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. MIDDLETOWN VALLEY BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025	
Mailing Address 1101 PROFESSIONAL COURT			FEC Identification Number C	
City HAGERSTOWN	State MD	Zip Code 21740	Amount of Each Disbursement this Period 37.97	
Purpose of Disbursement BANK FEES		Category/ Type	Transaction ID : SB17.24619	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. MIDDLETOWN VALLEY BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2025	
Mailing Address 1101 PROFESSIONAL COURT			FEC Identification Number C	
City HAGERSTOWN	State MD	Zip Code 21740	Amount of Each Disbursement this Period 38.00	
Purpose of Disbursement BANK FEES		Category/ Type	Transaction ID : SB17.24642	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	257.42
<b>TOTAL</b> 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 57 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MIDDLETOWN VALLEY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2025
Mailing Address 1101 PROFESSIONAL COURT		FEC Identification Number C
City HAGERSTOWN	State MD	Zip Code 21740
Purpose of Disbursement BANK FEES		Amount of Each Disbursement this Period 88.95
Candidate Name		Transaction ID : SB17.24643
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NORDSTROM</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2025
Mailing Address 8702 KEYSTONE CROSSING		FEC Identification Number C
City INDIANAPOLIS	State IN	Zip Code 46240
Purpose of Disbursement OFFICE SUPPLIES		Amount of Each Disbursement this Period 331.70
Candidate Name		Transaction ID : SB17.24581
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NORDSTROM</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2025
Mailing Address 8702 KEYSTONE CROSSING		FEC Identification Number C
City INDIANAPOLIS	State IN	Zip Code 46240
Purpose of Disbursement OFFICE SUPPLIES		Amount of Each Disbursement this Period 331.70
Candidate Name		Transaction ID : SB17.24582
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	752.35
<b>TOTAL</b> 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)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**A. PERCIPIENT STRATEGIES LLC**

Mailing Address 1032 15TH ST NW  
PMB 424

City WASHINGTON    State DC    Zip Code 20005

Purpose of Disbursement  
RESEARCH CONSULTING

Candidate Name

Office Sought:  House     Senate     President  
 Disbursement For: 2026  
 Primary     General  
 Other (specify) ▼

State:    District:

Date of Disbursement  
M M / D D / Y Y Y Y  
12 / 17 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
300.00

Transaction ID : SB17.24478

Memo Item

Full Name (Last, First, Middle Initial)  
**B. PHILLIPS 66**

Mailing Address 701 N JACKSON ST

City GREENCASTLE    State IN    Zip Code 46135

Purpose of Disbursement  
TRAVEL: FUEL

Candidate Name

Office Sought:  House     Senate     President  
 Disbursement For: 2026  
 Primary     General  
 Other (specify) ▼

State:    District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 07 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
24.75

Transaction ID : SB17.24498

Memo Item

Full Name (Last, First, Middle Initial)  
**C. PHILLIPS 66**

Mailing Address 701 N JACKSON ST

City GREENCASTLE    State IN    Zip Code 46135

Purpose of Disbursement  
TRAVEL: FUEL

Candidate Name

Office Sought:  House     Senate     President  
 Disbursement For: 2026  
 Primary     General  
 Other (specify) ▼

State:    District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 20 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
100.00

Transaction ID : SB17.24519

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	424.75
<b>TOTAL</b> 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 59 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PHILLIPS 66</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2025
Mailing Address 701 N JACKSON ST		FEC Identification Number C
City GREENCASTLE	State IN	Zip Code 46135
Purpose of Disbursement TRAVEL: FUEL		Amount of Each Disbursement this Period 100.00
Candidate Name		Transaction ID : SB17.24590
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. POSTAGE FOR DIRECT MAIL FUNDRAISING, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2025
Mailing Address 20130 LAKEVIEW CENTER PLAZA, SUITE		FEC Identification Number C
City ASHBURN	State VA	Zip Code 20147
Purpose of Disbursement POSTAGE & DELIVERY SERVICES		Amount of Each Disbursement this Period 2048.31
Candidate Name		Transaction ID : SB17.24646
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PUTNAM COUNTY HOSPITAL GALA</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2025
Mailing Address 1542 S BLOOMINGTON STREET		FEC Identification Number C
City GREENCASTLE	State IN	Zip Code 46135
Purpose of Disbursement EVENT REGISTRATION FEE		Amount of Each Disbursement this Period 550.00
Candidate Name		Transaction ID : SB17.24603
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2698.31
<b>TOTAL</b> 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 60 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. RED CURVE SOLUTIONS</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2025	
Mailing Address 138 CONANT STREET SUITE 401			FEC Identification Number C	
City BEVERLY	State MA	Zip Code 01915	Amount of Each Disbursement this Period 14000.00	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type	Transaction ID : SB17.24471	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. SLING TV, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2025	
Mailing Address 9601 MERIDIAN BLVD			FEC Identification Number C	
City ENGLEWOOD	State CO	Zip Code 80112	Amount of Each Disbursement this Period 75.99	
Purpose of Disbursement UTILITIES		Category/ Type	Transaction ID : SB17.24504	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. SLING TV, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2025	
Mailing Address 9601 MERIDIAN BLVD			FEC Identification Number C	
City ENGLEWOOD	State CO	Zip Code 80112	Amount of Each Disbursement this Period 29.99	
Purpose of Disbursement UTILITIES		Category/ Type	Transaction ID : SB17.24604	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	14105.98
<b>TOTAL</b> 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 61 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SLING TV, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2025	
Mailing Address 9601 MERIDIAN BLVD			FEC Identification Number C	
City ENGLEWOOD	State CO	Zip Code 80112	Amount of Each Disbursement this Period 60.99	
Purpose of Disbursement UTILITIES		Category/ Type	Transaction ID : SB17.24635	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. SPEEDWAY</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2025	
Mailing Address 1157 INDIANAPOLIS RD			FEC Identification Number C	
City GREENCASTLE	State IN	Zip Code 46135	Amount of Each Disbursement this Period 122.14	
Purpose of Disbursement TRAVEL: FUEL		Category/ Type	Transaction ID : SB17.24612	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. THOMPSON HOTELS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2025	
Mailing Address 221 TINGEY STREET SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 879.62	
Purpose of Disbursement TRAVEL: LODGING		Category/ Type	Transaction ID : SB17.24505	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1062.75
<b>TOTAL</b> 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 62 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TJ MAXX</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2025
Mailing Address 2685 E MAIN ST		FEC Identification Number C
City PLAINFIELD	State IN	Zip Code 46168
Purpose of Disbursement OFFICE SUPPLIES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 222.43	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.24521
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. TMA DIRECT, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2025
Mailing Address 1900 RESTON METRO PLAZA SUITE 600		FEC Identification Number C
City RESTON	State VA	Zip Code 20190
Purpose of Disbursement FUNDRAISING FEES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 8.55	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.24518
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. TMA DIRECT, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2025
Mailing Address 1900 RESTON METRO PLAZA SUITE 600		FEC Identification Number C
City RESTON	State VA	Zip Code 20190
Purpose of Disbursement FUNDRAISING FEES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 0.85	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.24531
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	231.83
<b>TOTAL</b> 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 63 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TMA DIRECT, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2025	
Mailing Address 1900 RESTON METRO PLAZA SUITE 600			FEC Identification Number C	
City RESTON	State VA	Zip Code 20190	Amount of Each Disbursement this Period 168.40	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24536	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. TMA DIRECT, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2025	
Mailing Address 1900 RESTON METRO PLAZA SUITE 600			FEC Identification Number C	
City RESTON	State VA	Zip Code 20190	Amount of Each Disbursement this Period 53.85	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24539	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. TMA DIRECT, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2025	
Mailing Address 1900 RESTON METRO PLAZA SUITE 600			FEC Identification Number C	
City RESTON	State VA	Zip Code 20190	Amount of Each Disbursement this Period 5.12	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.24547	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	227.37
<b>TOTAL</b> 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 64 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TMA DIRECT, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025
Mailing Address 1900 RESTON METRO PLAZA SUITE 600		FEC Identification Number C
City RESTON	State VA	Zip Code 20190
Purpose of Disbursement FUNDRAISING FEES		Amount of Each Disbursement this Period 1.79
Candidate Name		Transaction ID : SB17.24555
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. TMA DIRECT, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2025
Mailing Address 1900 RESTON METRO PLAZA SUITE 600		FEC Identification Number C
City RESTON	State VA	Zip Code 20190
Purpose of Disbursement FUNDRAISING FEES		Amount of Each Disbursement this Period 109.52
Candidate Name		Transaction ID : SB17.24559
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. TMA DIRECT, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2025
Mailing Address 1900 RESTON METRO PLAZA SUITE 600		FEC Identification Number C
City RESTON	State VA	Zip Code 20190
Purpose of Disbursement FUNDRAISING FEES		Amount of Each Disbursement this Period 17.95
Candidate Name		Transaction ID : SB17.24565
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	129.26
<b>TOTAL</b> 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 65 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**A. TMA DIRECT, INC.**

Mailing Address 1900 RESTON METRO PLAZA  
SUITE 600

City RESTON State VA Zip Code 20190

Purpose of Disbursement FUNDRAISING FEES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2026  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 06 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 4.27

Transaction ID : SB17.24568

Memo Item

Full Name (Last, First, Middle Initial)  
**B. USPS**

Mailing Address 8 E WALNUT ST

City GREENCASTLE State IN Zip Code 46135

Purpose of Disbursement POSTAGE EXPENSE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2026  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 06 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 133.61

Transaction ID : SB17.24576

Memo Item

Full Name (Last, First, Middle Initial)  
**C. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2026  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 01 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 0.94

Transaction ID : SB17.24484

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 138.82

**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 66 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 1.87
Candidate Name		Transaction ID : SB17.24485
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 0.37
Candidate Name		Transaction ID : SB17.24486
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 0.04
Candidate Name		Transaction ID : SB17.24493
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2.28
<b>TOTAL</b> 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 67 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 3.94
Candidate Name	Category/ Type	Transaction ID : SB17.24499
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 0.94
Candidate Name	Category/ Type	Transaction ID : SB17.24507
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 0.08
Candidate Name	Category/ Type	Transaction ID : SB17.24508
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4.96
<b>TOTAL</b> 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 68 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 0.39
Candidate Name	Category/Type	Transaction ID : SB17.24513
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 0.37
Candidate Name	Category/Type	Transaction ID : SB17.24517
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 1.46
Candidate Name	Category/Type	Transaction ID : SB17.24525
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2.22
<b>TOTAL</b> 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 69 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 0.41
Candidate Name		Transaction ID : SB17.24530
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 55.16
Candidate Name		Transaction ID : SB17.24533
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 67.08
Candidate Name		Transaction ID : SB17.24537
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	122.65
<b>TOTAL</b> 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 70 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 5.97
Candidate Name	Category/ Type	Transaction ID : SB17.24541
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 2.49
Candidate Name	Category/ Type	Transaction ID : SB17.24544
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 2.81
Candidate Name	Category/ Type	Transaction ID : SB17.24549
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	11.27
<b>TOTAL</b> 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 71 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 34.93	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.24551
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANDISE FEES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 23.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.24552
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 11.49	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.24556
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	69.42
<b>TOTAL</b> 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 72 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 1.57
Candidate Name		Transaction ID : SB17.24563
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 0.19
Candidate Name		Transaction ID : SB17.24566
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 0.94
Candidate Name		Transaction ID : SB17.24574
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2.70
<b>TOTAL</b> 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 73 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 39.40
Candidate Name		Transaction ID : SB17.24587
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 247.59
Candidate Name		Transaction ID : SB17.24592
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 0.39
Candidate Name		Transaction ID : SB17.24598
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	287.38
<b>TOTAL</b> 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 74 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 2.43
Candidate Name	Category/ Type	Transaction ID : SB17.24607
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 0.37
Candidate Name	Category/ Type	Transaction ID : SB17.24609
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 0.94
Candidate Name	Category/ Type	Transaction ID : SB17.24613
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3.74
<b>TOTAL</b> 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 75 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1.31	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.24615 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 0.04	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.24620 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 0.75	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.24622 <input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2.10
<b>TOTAL</b> 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 76 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 0.94	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.24624
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 0.39	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.24627
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 93.05	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.24630
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	94.38
<b>TOTAL</b> 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)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 0.37
Candidate Name		Transaction ID : SB17.24637
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State:    District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 0.19
Candidate Name		Transaction ID : SB17.24633
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State:    District:		

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 0.33
Candidate Name		Transaction ID : SB17.24634
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State:    District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.89
<b>TOTAL</b> 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 78 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 0.94	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.24638
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.94
<b>TOTAL</b> This Period (last page this line number only).....▶	94210.31

# 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 79 OF 82	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. 19TH STAR STATE SOLUTIONS LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2025	
Mailing Address 1102 N BEVILLE AVE			FEC Identification Number C	
City INDIANAPOLIS	State IN	Zip Code 46201	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type	Transaction ID : SB20A.24647	
Candidate Name			Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item	
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) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	300.00

# 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 80 OF 82	
	<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)  
**ELECT JIM BAIRD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BAUGH FOR SHERIFF</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2025
Mailing Address PO BOX 935		FEC Identification Number C
City GREENCASTLE	State IN	Zip Code 46135
Purpose of Disbursement NON-FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period 250.00
Candidate Name		Transaction ID : SB21.24649
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PUTNAM COUNTY REPUBLICAN CENTRAL COMMITTEE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2025
Mailing Address PO BOX 202		FEC Identification Number C
City GREENCASTLE	State IN	Zip Code 46135
Purpose of Disbursement NON-FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period 883.00
Candidate Name		Transaction ID : SB21.24650
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1133.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1133.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **ELECT JIM BAIRD FOR CONGRESS** Transaction ID : **SC/10.4361**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2018
BAIRD, JAMES R PHD, R, Dr.,			<input checked="" type="checkbox"/> Primary
Mailing Address PO BOX 203			<input type="checkbox"/> General
City GREENCASTLE		State IN	ZIP Code 46235
			<input checked="" type="checkbox"/> Personal Funds of the Candidate
Original Amount of Loan		Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00		40000.00	10000.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 04 / 27 / 2018	M M / D D / Y Y Y Y 12/31/2020	3.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	10000.00
<b>TOTALS</b> 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

NAME OF COMMITTEE (In Full) **ELECT JIM BAIRD FOR CONGRESS** Transaction ID : **SC/10.11903**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2024
BAIRD, JAMES R PHD, R, Dr.,			<input checked="" type="checkbox"/> Primary
Mailing Address PO BOX 203			<input type="checkbox"/> General
City GREENCASTLE		State IN	ZIP Code 46235
			<input checked="" type="checkbox"/> Personal Funds of the Candidate
Election: 2024			<input type="checkbox"/> Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
200000.00	0.00	200000.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	03 / 15 / 2024	ON DEMAND	8.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	200000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	210000.00

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