

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

6457

FORM JC/OH
COVER SHEET PG 1

The JC/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00021113	2 PAGE # 1 of 13
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: Mr. FIRST: Charles F. MI: _____ NICKNAME: Charlie LAST: Baird SUFFIX: _____	OFFICE USE ONLY Date Received: _____ Date Hand-delivered or Date Postmarked: _____ Receipt #: _____ Amount: _____ Date Processed: _____ Date Imaged: _____	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 4909 Interlachen Lane Austin, TX 78747		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR: Mr. FIRST: Charles F. MI: _____ NICKNAME: Charlie LAST: Baird SUFFIX: _____		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE 4909 Interlachen Lane Austin, TX 78747		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 233-4955		
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 10/29/2006 12/31/2006		
10 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) District Judge District 299	12 OFFICE SOUGHT (if known)	
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	... Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ... Name: _____ Address/PO Box: Apt. / Suite #: City: State: Zip Code		

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

14 C/OH NAME Baird, Charles F. (Mr.)

15 ACCOUNT # (Ethics Commission Files)
00021113

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	4,621.59
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	50.00
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4. TOTAL POLITICAL EXPENDITURES	\$	5,365.59
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CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	31,438.51
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
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18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Charles F. Baird

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Charles F. Baird, this the 16 day of January, 2007, to certify which, witness my hand and seal of office.

Kristin F. Baird

Kristin F. Baird

Notary

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/6 Report: 3/13	
2 FILER NAME Baird, Charles F. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00021113	
4 Date 11/10/2006	5 Full name of contributor Adkins, James <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$) \$150.00	
6 Contributor address; City; State; Zip Code 3904 Austin Woods Dr Austin, TX 78759			
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney	
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any) NA	
12 If contributor is a child, law firm of parent(s) (if any) NA			
13 in-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.		14 in-kind description (if applicable)	
15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
16 Departure city / location	17 Departure date	18 Destination city / location	19 Arrival date
20 Means of transportation		21 Purpose of travel	
4 Date 11/02/2006	5 Full name of contributor Campbell, John F <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$) \$100.00	
6 Contributor address; City; State; Zip Code 1601 Rio Grande St Ste 405 Austin, TX 78701			
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney	
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any) NA	
12 If contributor is a child, law firm of parent(s) (if any) NA			
13 in-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.		14 in-kind description (if applicable)	
15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
16 Departure city / location	17 Departure date	18 Destination city / location	19 Arrival date
20 Means of transportation		21 Purpose of travel	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 2/6 Report: 4/13			
2 FILER NAME Baird, Charles F. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 00021113			
4 Date 12/02/2006		5 Full name of contributor Capital One <input type="checkbox"/> out-of-state PAC(ID# _____)			7 Amount of contribution (\$) \$71.59		
		6 Contributor address; City; State; Zip Code 4301 W William Cannon Dr Austin, TX 78749					
8 Contributor's principal occupation				9 Contributor's job title			
10 Contributor's employer/law firm				11 Law firm of contributor's spouse (if any)			
12 If contributor is a child, law firm of parent(s) (if any) .							
13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.				14 In-kind description (if applicable) Bank Interest			
15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)							
16 Departure city / location		17 Departure date		18 Destination city / location		19 Arrival date	
20 Means of transportation				21 Purpose of travel			
4 Date 11/15/2006		5 Full name of contributor Clinton, Hazel <input type="checkbox"/> out-of-state PAC(ID# _____)			7 Amount of contribution (\$) \$100.00		
		6 Contributor address; City; State; Zip Code 9305 Happy Trail Austin, TX 78754					
8 Contributor's principal occupation Retired				9 Contributor's job title Retired			
10 Contributor's employer/law firm Retired				11 Law firm of contributor's spouse (if any) NA			
12 If contributor is a child, law firm of parent(s) (if any) NA							
13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.				14 In-kind description (if applicable)			
15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)							
16 Departure city / location		17 Departure date		18 Destination city / location		19 Arrival date	
20 Means of transportation				21 Purpose of travel			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 3/6 Report: 5/13			
2 FILER NAME Baird, Charles F. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 00021113			
4 Date 10/29/2006		5 Full name of contributor DRIVE Committee <input checked="" type="checkbox"/> out-of-state PAC(ID# C00032979)			7 Amount of contribution (\$) \$2,500.00		
6 Contributor address: City: State: Zip Code 25 Louisiana Ave NW Washington, DC 20001							
8 Contributor's principal occupation				9 Contributor's job title			
10 Contributor's employer/law firm				11 Law firm of contributor's spouse (if any)			
12 If contributor is a child, law firm of parent(s) (if any)							
13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.				14 In-kind description (if applicable)			
15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)							
16 Departure city / location		17 Departure date		18 Destination city / location		19 Arrival date	
20 Means of transportation				21 Purpose of travel			
4 Date 11/16/2006		5 Full name of contributor Dunham & Rogers PC <input type="checkbox"/> out-of-state PAC(ID# _____)			7 Amount of contribution (\$) \$1,000.00		
6 Contributor address: City: State: Zip Code 1800 Guadalupe Austin, TX 78701							
8 Contributor's principal occupation				9 Contributor's job title			
10 Contributor's employer/law firm				11 Law firm of contributor's spouse (if any)			
12 If contributor is a child, law firm of parent(s) (if any)							
13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.				14 In-kind description (if applicable)			
15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)							
16 Departure city / location		17 Departure date		18 Destination city / location		19 Arrival date	
20 Means of transportation				21 Purpose of travel			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/6 Report: 6/13	
2 FILER NAME Baird, Charles F. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00021113	
4 Date 10/29/2006	5 Full name of contributor Jones, Matthew <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$) \$100.00	
6 Contributor address: City: State: Zip Code 7802 Rutgers Ave Austin, TX 78757			
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney	
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any) NA	
12 If contributor is a child, law firm of parent(s) (if any) NA			
13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.		14 In-kind description (if applicable)	
15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
16 Departure city / location		17 Departure date	18 Destination city / location
			19 Arrival date
20 Means of transportation		21 Purpose of travel	
4 Date 11/15/2006	5 Full name of contributor Jorge G. Pineda and Associates <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$) \$150.00	
6 Contributor address: City: State: Zip Code 2211 S IH 35 Ste 107 Austin, TX 78741			
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney	
10 Contributor's employer/law firm Jorge Pineda and Associates		11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)			
13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.		14 In-kind description (if applicable)	
15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
16 Departure city / location		17 Departure date	18 Destination city / location
			19 Arrival date
20 Means of transportation		21 Purpose of travel	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/6 Report: 7/13	
2 FILER NAME Baird, Charles F. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00021113	
4 Date 10/30/2006	5 Full name of contributor Shuvalov, Andy <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$) \$100.00	
6 Contributor address: City; State; Zip Code PO Box 738 Manor, TX 78653			
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney	
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any) NA	
12 If contributor is a child, law firm of parent(s) (if any) NA			
13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.		14 In-kind description (if applicable)	
15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
16 Departure city / location		17 Departure date	18 Destination city / location
			19 Arrival date
20 Means of transportation		21 Purpose of travel	
4 Date 11/02/2006	5 Full name of contributor Smith, Robert <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$) \$150.00	
6 Contributor address: City; State; Zip Code 1108 Nueces St Austin, TX 78701			
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney	
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any) NA	
12 If contributor is a child, law firm of parent(s) (if any) NA			
13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.		14 In-kind description (if applicable)	
15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
16 Departure city / location		17 Departure date	18 Destination city / location
			19 Arrival date
20 Means of transportation		21 Purpose of travel	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/6 Report: 8/13	
2 FILER NAME Baird, Charles F. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00021113	
4 Date 11/04/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Son, Thad E	7 Amount of contribution (\$) \$200.00	
6 Contributor address; City; State; Zip Code 104 Cold Water Lane Lakeway, TX 78734			
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney	
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any) NA	
12 If contributor is a child, law firm of parent(s) (if any) NA			
13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.		14 In-kind description (if applicable)	
15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
16 Departure city / location	17 Departure date	18 Destination city / location	19 Arrival date
20 Means of transportation		21 Purpose of travel	

POLITICAL EXPENDITURES

SCHEDULE F

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #
Schedule: 1/2 Report: 9/13

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00021113

4 Date 12/02/2006	5 Payee name Goin' Postal 6 Payee address; City; State; Zip Code 9300 S IH 35 Austin, TX 78748	7 Amount (\$) \$71.59
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8 Purpose of payment (See instructions regarding type of information required.) Postage and Copying <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
--	---

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

4 Date 12/05/2006	5 Payee name Kolstad, Laura 6 Payee address; City; State; Zip Code 7108 Teaberry Dr Austin, TX 78745	7 Amount (\$) \$1,000.47
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8 Purpose of payment (See instructions regarding type of information required.) consulting <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
---	---

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/2 Report: 10/13

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00021113

4 Date 10/29/2006	5 Payee name The Austin Chronicle	7 Amount (\$) \$1,452.00
6 Payee address; City; State; Zip Code PO Box 49066 Austin, TX 78765		

8 Purpose of payment (See instructions regarding type of information required.) Ads <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

4 Date 11/15/2006	5 Payee name USPS	7 Amount (\$) \$42.00
6 Payee address; City; State; Zip Code 3903 South Congress Ave Austin, TX 78704		

8 Purpose of payment (See instructions regarding type of information required.) Postage <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
---	--

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/3 Report: 11/13

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00021113

4 Date 11/27/2006	5 Payee name Cuba Libre	7 Amount (S) \$1,990.80
6 Payee address: City; State; Zip Code 409 Colorado St Austin, TX 78701		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
• Victory Party

Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

4 Date 10/29/2006	5 Payee name Office Depot	7 Amount (S) \$104.79
6 Payee address: City; State; Zip Code 2101 South Lamar Austin, TX 78704		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
Office Supplies

Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/3 Report: 12/13

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00021113

4 Date 10/29/2006	5 Payee name Promopedler	7 Amount (S) \$556.58
6 Payee address; City; State; Zip Code Sherwood West Bldg 20015 SW Pacific Hwy 99 Ste 300 Sherwood, OR 97140		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
Campaign Promotional Materials

Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

4 Date 10/29/2006	5 Payee name USPS	7 Amount (S) \$39.78
6 Payee address; City; State; Zip Code 3903 South Congress Ave Austin, TX 78704		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
Postage

Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 3/3 Report: 13/13

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT #

(Ethics Commission file #)

00021113

4 Date

11/27/2006

5 Payee name
USPS

6 Payee address; City; State; Zip Code

3903 South Congress Ave
Austin, TX 78704

7 Amount
(S)

\$57.58

Reimbursement from
political contributions
intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
Postage

Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) travelling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location

11 Departure date

12 Destination city / location

13 Arrival date

14 Means of transportation

15 Purpose of travel

JUDGE CHARLIE BAIRD

299TH DISTRICT COURT
P. O. Box 1242, Austin, Texas 78767-1242
Tel: 512-854-9442
EMAIL: CHARLIE.BAIRD@CO.TRAVIS.TX.US

January 16, 2007

Hon. Dana DeBeauvoir
Travis County Clerk
P.O. Box 1748
Austin, TX 78767-1748

TRAVIS COUNTY TEXAS

Jan 16 2007 11:26

CLERK

Judicial Candidate/Officerholder Campaign Finance Report

Dear Dana:

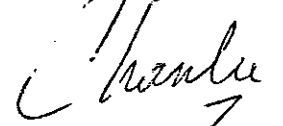
Enclosed please find my Judicial Candidate/Officerholder Campaign Finance Report for the period of 10/29 – 12/31/06.

Also, please note a change of address. Please send all correspondence to the address noted above.

Please do not hesitate to contact me should you have any questions or desire additional information.

Thanking you in advance for your courtesy and cooperation, I remain

Yours truly,



Charles F. Baird

Enclosure



P.O. Box 1242
Austin, Tx 78767-1242

JUDGE CHARLIE BAIRD

299TH DISTRICT COURT
P. O. Box 1242
Austin, Texas 78767-1242

Address Service Requested

CAMPAIGN/OFFICEHOLDER FILINGS DIV.
C/o Hon. Dana DeBeauvoir
Travis County Clerk
P.O. Box 1748
Austin, TX 78767-1748



RECORD

2007 JAN 19 PM 1:23

CLERK
TRAVIS COUNTY TEXAS



Elections

