

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 25 E Main Street  
 Check if different than previously reported. (ACC)  
Richmond VA 23219-2109

2. **FEC IDENTIFICATION NUMBER** C00420174  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2011 through 01 31 2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Rose Ann Janis

Signature of Treasurer Electronically Filed by Rose Ann Janis Date 02 16 2011

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Cantor Victory Fund

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	Y	Y	Y	Y	2	0	1	1		57973.69
Y	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	57973.69									
(c) Total Receipts (from Line 19) .....	79802.44	79802.44								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	137776.13	137776.13								
7. Total Disbursements (from Line 31) .....	29544.88	29544.88								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	108231.25	108231.25								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Cantor Victory Fund

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	79800.00	79800.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	79800.00	79800.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	79800.00	79800.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	2.44	2.44
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	79802.44	79802.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	79802.44	79802.44

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	29544.88	29544.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	29544.88	29544.88
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(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 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	29544.88	29544.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29544.88	29544.88

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	79800.00	79800.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	79800.00	79800.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	29544.88	29544.88
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	29544.88	29544.88

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)  
Cantor Victory Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) William Goodwin, Jr.	Date of Receipt MM / DD / YYYY 01 / 28 / 2011
	Mailing Address 901 E Cary Street Suite 1500	<b>Transaction ID:</b> SA11AI-614-1708-c
	City Richmond State VA Zip Code 23219-4042	Amount of Each Receipt this Period 40000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>NOTE:</b> Joint Fundraising Proceeds
	Name of Employer CCA Industries, Inc. Occupation Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 40000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Frank Reidy	Date of Receipt MM / DD / YYYY 01 / 25 / 2011
	Mailing Address 515 Wilder Road	<b>Transaction ID:</b> SA11AI-28-1707-c
	City Virginia Beach State VA Zip Code 23451-2346	Amount of Each Receipt this Period 4800.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>NOTE:</b> Joint Fundraising Proceeds
	Name of Employer Penn General Energy Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4800.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. John Roberts	Date of Receipt MM / DD / YYYY 01 / 21 / 2011
	Mailing Address 1500 Westbrook Court Apt. 5115	<b>Transaction ID:</b> SA11AI-1941-1706-c
	City Richmond State VA Zip Code 23227-3378	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>NOTE:</b> Joint Fundraising Proceeds
	Name of Employer Northern Solite Corp. Occupation Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>54800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 7 / 12  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Cantor Victory Fund

**A.** Full Name (Last, First, Middle Initial)  
Marcus M. Weinstein

Mailing Address PO Box 31335

City Richmond State VA Zip Code 23294-1335

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

Name of Employer Weinstein Properties Occupation Real Estate

Receipt For:  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 1 / 0 7 / 2 0 1 1

Transaction ID: SA11AI-676-1034-c

Amount of Each Receipt this Period  
25000.00

NOTE: Joint Fundraising Proceed

Aggregate Year-to-Date ▼  
25000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	25000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	79800.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Cantor Victory Fund

A.	Full Name (Last, First, Middle Initial) Allison Coccia	Transaction ID: SB21B-1208-1725-e Date of Disbursement
	Mailing Address 301 Virginia Street Unit 1507	<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City Richmond State VA Zip Code 23219-4189	Amount of Each Disbursement this Period
	Purpose of Disbursement CVF Salary	<input type="text" value="2787.12"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Aristotle International, Inc.	Transaction ID: SB21B-1944-1720-e Date of Disbursement
	Mailing Address 205 Pennsylvania Avenue SE	<input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20003-1164	Amount of Each Disbursement this Period
	Purpose of Disbursement CVF Software Cost	<input type="text" value="1200.00"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Business Card	Transaction ID: SB21B-1942-1713-e Date of Disbursement
	Mailing Address PO Box 15469	<input type="text" value="01"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City Wilmington State DE Zip Code 19886-5469	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment: See Below	<input type="text" value="572.00"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4559.12"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Cantor Victory Fund

A.	Full Name (Last, First, Middle Initial) USPS  Mailing Address 11357 Nuckols Road  City State Zip Code Glen Allen VA 23059-5504  Purpose of Disbursement : CVF Postage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-1626-1704-V Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 1 1  Amount of Each Disbursement this Period 572.00  <b>[MEMO ITEM]</b> Subitemization of Business Card ( 01/04/11 )
B.	Full Name (Last, First, Middle Initial) Cathy Blaney & Assoc  Mailing Address 150 Broadway  City State Zip Code New York NY 10038-4381  Purpose of Disbursement : CVF Fundraising Consulting Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-1355-1712-e Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 1 1  Amount of Each Disbursement this Period 2500.00  001 Category/ Type
C.	Full Name (Last, First, Middle Initial) Kristin M. Young  Mailing Address 902 Summer Hill Drive  City State Zip Code South Windsor CT 06074-2879  Purpose of Disbursement : CVF Salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-1209-1727-e Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 1 1  Amount of Each Disbursement this Period 3219.25  001 Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

5719.25

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Cantor Victory Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Matthew Jubitz Consulting <hr/> Mailing Address 801 S Grand Avenue Apt. 2001 <hr/> City Los Angeles State CA Zip Code 90017-4673 <hr/> Purpose of Disbursement CVF Fundraising Consulting Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span> Category/Type <hr/> 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:	Transaction ID: SB21B-1039-1711-e Date of Disbursement <span style="border: 1px solid black; padding: 2px;">01</span> / <span style="border: 1px solid black; padding: 2px;">05</span> / <span style="border: 1px solid black; padding: 2px;">2011</span> <hr/> Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">1000.00</span>
<b>B.</b>	Full Name (Last, First, Middle Initial) McGuire Woods <hr/> Mailing Address 901 E Cary Street <hr/> City Richmond State VA Zip Code 23219-4063 <hr/> Purpose of Disbursement CVF Legal Services Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span> Category/Type <hr/> 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:	Transaction ID: SB21B-1548-1719-e Date of Disbursement <span style="border: 1px solid black; padding: 2px;">01</span> / <span style="border: 1px solid black; padding: 2px;">13</span> / <span style="border: 1px solid black; padding: 2px;">2011</span> <hr/> Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">565.00</span>
<b>C.</b>	Full Name (Last, First, Middle Initial) Melissa Nelson <hr/> Mailing Address 977 Gorham Court <hr/> City Midlothian State VA Zip Code 23114-4648 <hr/> Purpose of Disbursement CVF Salary Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span> Category/Type <hr/> 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:	Transaction ID: SB21B-1713-1728-e Date of Disbursement <span style="border: 1px solid black; padding: 2px;">01</span> / <span style="border: 1px solid black; padding: 2px;">31</span> / <span style="border: 1px solid black; padding: 2px;">2011</span> <hr/> Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">5115.63</span>

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

**6680.63**

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Cantor Victory Fund

A.	Full Name (Last, First, Middle Initial) Rose Ann Janis	Transaction ID: SB21B-982-1729-e
	Mailing Address 5005 Amberwood Drive	Date of Disbursement MM / DD / YYYY 01 / 31 / 2011
	City State Zip Code Glen Allen VA 23059-7530	Amount of Each Disbursement this Period 2251.88
	Purpose of Disbursement CVF Salary	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) The Magnolia Group	Transaction ID: SB21B-1337-1710-e
	Mailing Address PO Box 192741	Date of Disbursement MM / DD / YYYY 01 / 04 / 2011
	City State Zip Code Dallas TX 75219-8527	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement CVF Fundraising Consulting	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -

C.	Full Name (Last, First, Middle Initial) U.S. Treasury	Transaction ID: SB21B-1221-1722-e
	Mailing Address Internal Revenue Service	Date of Disbursement MM / DD / YYYY 01 / 11 / 2011
	City State Zip Code Austin TX 73301-0001	Amount of Each Disbursement this Period 4983.88
	Purpose of Disbursement CVF Payroll Taxes	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	9735.76
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Cantor Victory Fund

<b>A.</b> Full Name (Last, First, Middle Initial) Virginia Dept of Taxation <hr/> Mailing Address PO Box 27264 <hr/> City Richmond State VA Zip Code 23261-7264 Purpose of Disbursement CVF Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-1223-1724-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 1 1
	Amount of Each Disbursement this Period 643.00 Category/Type 001
<b>B.</b> Full Name (Last, First, Middle Initial) Joel Katz <hr/> Mailing Address 1719 26th Street S Apt. 2 <hr/> City Arlington State VA Zip Code 22206-2952 Purpose of Disbursement CVF Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-1945-1726-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 1 1
	Amount of Each Disbursement this Period 1800.25 Category/Type 001

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

2443.25

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

29138.01