FEC FORM 3		T OF RE SBURSE	MENTS		Offi	ce Use Only
1. NAME OF COMMITTEE (ir	USE FEC MAI full) OR TYPE OR		Example:If typing, ty over the lines	rpe		
Cantor Joint Fun	draising Committee					
ADDRESS (number a	and street) 25 East Ma					
¥ `						
Check if diff than previou reported. (A	isly Dichmond					23219
2. FEC IDENTIFIC	ATION NUMBER 🛛 🗑	CITY A	l	STA		ZIP CODE 🛋
C0042017	/4	3. IS THIS REPORT	X NEW (N)	OR	AMENDED (A)	
		(b) 12-Day P	RE-Election Report Primary (12P) Convention (1)		General (12G) Special (12S)	Runoff (12R)
Octobe	er 15 Quarterly Report (Q3)	Election o	n L	L.		in the State of
Januar	y 31 Year-End Report (YE)	(c) 30-Day P	OST-Election Repo		Runoff (30R)	Special (30S)
Termin	ation Report (TER)	Election o	n			in the State of
5. Covering Period	04 01	2006	through	0 6	3 0	2006
-	amined this Report and to the	-	dge and belief it is t	rue, correct and	complete.	
Type or Print Name of	f Treasurer Hose	Ann Janis				
Signature of Treasure	er Electronically Filed by	Rose Ann Janis	3	Date	07	1 4 2 0 0 6
NOTE : Submission of	of false, erroneous, or incom	blete information ma	y subject the perso	n signing this R	eport to the pena	alties of 2 U.S.C 437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

Image# 26940240729		SUMMARY PAGE of Receipts and Disbursements	
	FEC Form 3 (Revised 02/2003)		Page 2
	Vrite or Type Committee Name		
(Cantor Joint Fundraising Committee		
F	Report Covering the Period: From:	M M D D V Y Y Y Y 0 4 0 1 2 0 0 6	To: 0 6 D D Y Y Y Y 0 6 3 0 2 0 0 6
		COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net Contributions (other than loans)		
	(a) Total Contributions(other than loans) (from Line 11(e))	47600.00	47775.00
	(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	47600.00	47775.00
7.	Net Operating Expenditures	-	
	(a) Total Operating Expenditures (from Line 17)	5136.06	5204.71
	(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c) Net Operating Expenditures(subtract Line 7(b) from Line 7(a))	5136.06	5204.71
8.	Cash on Hand at Close of Reporting Period (from Line 27)	4261.79	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

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

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

ay c # /	26940240730 FEC Form 3 (Revised 02/2003)	DETAILED SUMMARY PAGE of Receipts	Page 3
	e or Type Committee Name ntor Joint Fundraising Committee		
Rep	ort Covering the Period: From:	M M D D Y	To: 06 D D Y Y Y Y 06 30 200
	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. C	ONTRIBUTIONS (other than loans) FROM	M:	
(a	 a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) 	47600.00	47600.00
		0.00	175.00
	 (ii) Unitemized (iii) TOTAL of contributions from individuals 	47600.00	47775.00
(t	b) Political Party Committees	0.00	0.00
(C		0.00	0.00
(c (e	·	0.00	0.00
(-	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	47600.00	47775.00
	RANSFERS FROM OTHER UTHORIZED COMMITTEES	0.00	0.00
3. L	OANS	-	
(a	a) Made or Guaranteed by the Candidate	0.00	0.00
(t		0.00	0.00
(c	,	0.00	0.00
E	DFFSETS TO OPERATING XPENDITURES Refunds, Rebates, etc.)	0.00	0.00
	DTHER RECEIPTS Dividends, Interest, etc.)	5.49	5.50
6. T	OTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	47605.49	47780.50

Image# 26940240731

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003) **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 5136.06 5204.71 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 38314.00 38314.00 AUTHORIZED COMMITTEES..... 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of all Other Loans..... (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other 0.00 0.00 Than Political Committees..... 0.00 0.00 (b) Political Party Committees..... (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS..... 22. TOTAL DISBURSEMENTS 43450.06 43518.71 (add Lines 17, 18, 19(c), 20(d), and 21)

III. CASH SUMMARY

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD	106.36
24.	TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)	47605.49
25.	SUBTOTAL (add Line 23 and Line 24)	47711.85
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	43450.06
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	4261.79

Page 4

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS			FOR LINE NUMBER: PAGE 5 / 12 (check only one) X X 11a 11b 11c 11d 12 13a 13b 14 15						
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any personny personny personny political committee to the solution of any political committee to the solution.	on for the purpose of soliciting contributions						
$\left \right>$	NAME OF COMMITTEE (In Full) Cantor Joint Fundraising Committee									
Α.	Full Name (Last, First, Middle Initial) Richard Edson			Date of Receipt						
	Mailing Address 4520 East West High Suite 615	way		M M M / D D / Y <thy< th=""> Y Y</thy<>						
	City Bethesda	State MD	Zip Code 20814	Transaction ID: 60630.C8 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		5000.00						
	Name of Employer Housing Capital Advisors, Inc. Receipt For: 2006		n ate Investment cycle-to-Date ▼	 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) 						
	Primary General X Other (specify) ▼ Joint Fundraising		5000.00	NOTE:Joint Fundraising Pr- oceed						
в.	Pr Full Name (Last, First, Middle Initial) Marc S. Goldman			Date of Receipt						
	Mailing Address 409 Washington Stree #391	et		0 4 / D D / Y Y Y Y 2 0 0 6						
	City Hoboken	State NJ	Zip Code 07030-4877	Transaction ID: 60630.C4 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		2100.00						
	Name of Employer Retired Receipt For: 2006	Occupation Retired		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)						
	Primary General X Other (specify) ▼ Joint Fundraising		zycle-to-Date ▼ 2100.00	NOTE: Joint Fundraising Pr- oceed						
с.	Pr Full Name (Last, First, Middle Initial) Marc S. Goldman			Date of Receipt						
	Mailing Address 409 Washington Stree #391	ət		M M / D D / Y Y Y Y 04 20 2006						
	City	State	Zip Code	Transaction ID: 60630.C5						
	Hoboken FEC ID number of contributing federal political committee.	NJ C	07030-4877	Amount of Each Receipt this Period						
	Name of Employer Retired	Occupation Retired	n	Receipt Limit Increased Due to Opponent's						
	Receipt For: 2006		Sycle-to-Date V	Spending (2 U.S.C. 441a(i)/441a-1)						
	X Other (specify) ▼ Joint Fundraising Pr	NOTE:Joint Fundraising Pr- oceed								
s	UBTOTAL of Receipts This Page (optional) .)	9200.00						
т	OTAL This Period (last page this line number	r only)								

IT	CHEDULE A (FEC Form 3) EMIZED RECEIPTS y information copied from such Reports and for commercial purposes, other than using th NAME OF COMMITTEE (In Full) Cantor Joint Fundraising Committee Full Name (Last, First, Middle Initial)	Statements may e name and add	Use separate schedule(s) or each category of the Detailed Summary Page y not be sold or used by any perso dress of any political committee to	FOR LINE NUMBER: PAGE 6 / 12 (check only one) III X 11a 12 13a 13b 14 15 on for the purpose of soliciting contributions solicit contributions from such committee.
Α.	Lindsay Rosenwald Mailing Address 6 Forest Lane City Lawrence FEC ID number of contributing federal political committee.	State NY	Zip Code 11559	Date of Receipt
	Name of Employer Paramount BioCapital Receipt For: 2006 Primary General X Other (specify) ▼ Joint Fundraising Pr	Occupation CEO & C Election C		 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) NOTE:Joint Fundraising Proceed
В.	Full Name (Last, First, Middle Initial) Rivki Rosenwald Mailing Address 6 Forest Lane City Lawrence FEC ID number of contributing federal political committee. Name of Employer Homemaker Receipt For: 2006 Primary General X Other (specify) ♥ Joint Fundraising Pr	State NY C Occupation Homema Election C		Date of Receipt Date of Receipt D D D / Y Y Y Y 2 0 0 6 Transaction ID: 60630.C7 Amount of Each Receipt this Period 19200.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) NOTE:Joint Fundraising Proceed

SUBTOTAL of Receipts This Page (optional)	►	38400.00
TOTAL This Period (last page this line number only)	►	47600.00

	CHEDULE B (FEC Form 3)	Use seperate schedule(s)	-	NUMBER: PAGE 7/12					
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21					
	y Information copied from such Reports and State or commercial purposes, other than using the nan								
	NAME OF COMMITTEE (In Full)								
\geq	Cantor Joint Fundraising Committee								
Α.	Full Name (Last, First, Middle Initial) Bankcard USA Merchant Services			Transaction ID: 60707.E17 Date of Disbursement					
	Mailing Address 5701 Lindero CYN. #3			$ \begin{bmatrix} M & M \\ 0 & 4 \end{bmatrix} $ $ \begin{bmatrix} D & D \\ 0 & 5 \end{bmatrix} $ $ \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{bmatrix} $					
	City Thousand Oaks	StateZip CodeCA91362-		Amount of Each Disbursement this Period					
	Purpose of Disbursement CREDIT CARD FEE			30.00					
	Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼		CREDIT CARD FEE					
	Full Name (Last, First, Middle Initial)			Transaction ID: 60707 E16					
в.	Bankcard USA Merchant Services			Transaction ID: 60707.E16 Date of Disbursement					
	Mailing Address 5701 Lindero CYN. #3								
	City Thousand Oaks	State Zip Code CA 91362-		Amount of Each Disbursement this Period					
	Purpose of Disbursement CREDIT CARD FEE		30.00 Refund or Disposal of Excess						
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Disburs Senate President	ement For: Primary General Other (specify) ▼		CREDIT CARD FEE					
	State: District:								
C.	Full Name (Last, First, Middle Initial) Bankcard USA Merchant Services			Transaction ID: 60707.E18 Date of Disbursement					
	Mailing Address 5701 Lindero CYN. #3			$ \begin{array}{c} \stackrel{\text{M}}{\text{05}} \stackrel{\text{M}}{\text{5}} & \stackrel{\text{D}}{\text{31}} & \stackrel{\text{D}}{\text{31}} & \stackrel{\text{V}}{\text{2006}} \stackrel{\text{V}}{\text{6}} \\ \end{array} $					
	City Thousand Oaks	StateZip CodeCA91362-		Amount of Each Disbursement this Period					
	Purpose of Disbursement CREDIT CARD DISCOUNT FEE			Refund or Disposal of Excess					
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)		CREDIT CARD DISCOUNT FEE					
	JBTOTAL of Disbursements This Page (optional)			174.50					

SCHEDULE B (FEC Form 3)	Use seperate schedule(s)		INE NUMBER: PAGE 8 / 12						
ITEMIZED DISBURSEMENTS	for each category of the	(check only							
	Detailed Summary Page	H H	20a - 20b - 20c - 21						
Any Information copied from such Reports and Statem									
or for commercial purposes, other than using the name	e and address of any political c	ommittee to soli	cit contributions from such committee						
Cantor Joint Fundraising Committee									
Full Name (Last, First, Middle Initial)			Transaction ID: 60711.E21						
A. Bankcard USA Merchant Services			Date of Disbursement						
Mailing Address 5701 Lindero CYN. #3			$ \begin{array}{c} M & M \\ 0 & 6 \end{array} \begin{array}{c} \prime & D & D \\ 0 & 2 \end{array} \begin{array}{c} \prime & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{array} $						
	State Zip Code		Amount of Each Disbursement this Period						
Thousand Oaks	CA 91362-		47.00						
Purpose of Disbursement			Refund or Disposal of Excess						
CREDIT CARD FEE Candidate Name	CREDIT CARD FEE								
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53						
Office Sought: House Disburse	ment For:								
Senate	Primary General		CREDIT CARD FEE						
President	Other (specify)								
State: District:									
Full Name (Last, First, Middle Initial) B. Bankcard USA Merchant Services			Transaction ID: 60711.E20 Date of Disbursement						
			0.000 m^{-1}						
Mailing Address 5701 Lindero CYN. #3									
	State Zip Code CA 91362-		Amount of Each Disbursement this Period						
		98.80							
Purpose of Disbursement CREDIT CARD FEE		Refund or Disposal of Excess							
Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53							
	ment For:		CREDIT CARD FEE						
Senate	Primary General								
State: District:	Other (specify)								
Full Name (Last, First, Middle Initial)			Transaction ID: 60620 EQ						
C. Rose Ann Janis			Transaction ID: 60630.E8 Date of Disbursement						
Mailing Address 5005 Amberwood Drive			$\begin{bmatrix} M & M \\ 0 & 4 \end{bmatrix} \begin{pmatrix} D & D \\ 2 & 8 \end{bmatrix} \begin{pmatrix} Y & Y & Y \\ 2 & 0 & 0 & 6 \end{pmatrix}$						
	State Zip Code VA 23059-		Amount of Each Disbursement this Period						
Purpose of Disbursement			1825.00						
ACCOUNTING FEE			Refund or Disposal of Excess						
Candidate Name	Candidate Name								
Senate President	ment For: Primary General Other (specify) ▼		ACCOUNTING FEE						
State: District:									
SUBTOTAL of Disbursements This Page (optional)		····· Þ	1941.70						
TOTAL This Period (last page this line number only)		►							

S	CHEDULE B (FEC Form 3)	Use seperate schedule(s)	-	NUMBER: PAGE 9/12
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	X 17 18 19a 19b
				20a 20b 20c 21
	y Information copied from such Reports and Stateme for commercial purposes, other than using the name			
\square	NAME OF COMMITTEE (In Full)			
\langle	Cantor Joint Fundraising Committee			
Α.	Full Name (Last, First, Middle Initial) Rose Ann Janis			Transaction ID: 60630.E7 Date of Disbursement
	Mailing Address 5005 Amberwood Drive			M 4 M / D 2 8 / Y 2 0 0 6 Y
		State Zip Code VA 23059-		Amount of Each Disbursement this Period
	Purpose of Disbursement REIMBURSE - COMPUTER SOFWARE			304.49 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify) ▼		REIMBURSE - COMPUTER SOFW- ARE
	Full Name (Last, First, Middle Initial)			
В.	Rose Ann Janis			Transaction ID: 60630.E9 Date of Disbursement
	Mailing Address 5005 Amberwood Drive		$ \begin{array}{c} M & M \\ 0 & 6 \end{array}^{M} \left(\begin{array}{c} D & D \\ 0 & 2 \end{array} \right) \left(\begin{array}{c} Y & Y & Y \\ 2 & 0 & 0 & 6 \end{array} \right) $	
		State Zip Code VA 23059-		Amount of Each Disbursement this Period
	Purpose of Disbursement REIMBURSE - COMPUTER SOFTWARE		149.00	
	Candidate Name	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) ▼		REIMBURSE - COMPUTER SOFT- WARE
	State: District: Full Name (Last, First, Middle Initial)			
C.	Rose Ann Janis			Transaction ID: 60630.E10 Date of Disbursement
	Mailing Address 5005 Amberwood Drive			$\begin{array}{c} \begin{array}{c} M & M \\ 0 & 6 \end{array} & \begin{array}{c} \prime & D & D \\ 0 & 2 \end{array} & \begin{array}{c} \prime & Y & Y & Y \\ Y & 2 & 0 & 0 & 6 \end{array} \end{array}$
		State Zip Code VA 23059-		Amount of Each Disbursement this Period
	Purpose of Disbursement ACCOUNTING FEE		· · ·	350.00 Refund or Disposal of Excess
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify) ▼		ACCOUNTING FEE
6	UBTOTAL of Disbursements This Page (optional)			803.49
\vdash	UDIVIAL OF DISDUISEMENTS THIS Page (optional)		····· Þ	
Т	OTAL This Period (last page this line number only)		►	

SCHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21			
Any Information copied from such Reports and Stateme or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full)						
Cantor Joint Fundraising Committee						
Full Name (Last, First, Middle Initial) A. Rose Ann Janis			Transaction ID: 60630.E11 Date of Disbursement			
Mailing Address 5005 Amberwood Drive			$\begin{array}{c} \begin{array}{c} M & M \\ 0 & 6 \end{array} \end{array} \begin{array}{c} \left(\begin{array}{c} D & D \\ 3 & 0 \end{array} \right) \end{array} \left(\begin{array}{c} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{array} \right)$			
,	State Zip Code VA 23059-		Amount of Each Disbursement this Period			
Purpose of Disbursement ACCOUNTING FEE Candidate Name			625.00 Refund or Disposal of Excess Contributions Required Under			
Office Sought: House Disburser	nent For:	Category/ Type	11 C.F.R. 400.53			
Senate	Primary General Other (specify) ▼		ACCOUNTING FEE			
Full Name (Last, First, Middle Initial)						
B. Marcus & Allen			Transaction ID: 60630.E4 Date of Disbursement 05^{M} / 12^{D} / 2006^{Y}			
Mailing Address 25 East Main Street Suite 200	Suite 200					
City S Richmond		Amount of Each Disbursement this Period				
Purpose of Disbursement COMPUTER		Refund or Disposal of Excess				
Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
President	nent For: Primary General Other (specify) V		COMPUTER			
State: District:						
Full Name (Last, First, Middle Initial) C. Marcus & Allen			Transaction ID: 60630.E5 Date of Disbursement			
Mailing Address 25 East Main Street Suite 200			$ \begin{array}{c} \overset{M}{0} \overset{M}{5} \overset{M}{1} \end{array} / \begin{array}{c} \overset{D}{1} \overset{D}{2} \end{array} / \begin{array}{c} \overset{V}{2} \overset{Y}{2} \overset{Y}{0} \overset{Y}{6} \overset{Y}{1} \end{array} $			
Richmond	State Zip Code VA 23219-		Amount of Each Disbursement this Period 170.09			
Purpose of Disbursement PRINTER						
Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	nent For: Primary General Other (specify) ▼		PRINTER			
SUBTOTAL of Disbursements This Page (optional)		►	1975.21			
TOTAL This Period (last page this line number only) .		►				

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS					FOR LINE (check only	E NUMBER: nly one) X 17 18 20a 20b				PA 19a 20c	GE	11 / 12 19b 21					
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating 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 Joint Fundraising Committee																	
Α.	Full Name (Last, First, Middle Initial) A. Marcus & Allen Mailing Address 25 East Main Street Suite 200									Transaction ID: 60630.E6 Date of Disbursement 0.5 / 1.2 / 2.006							
				itate /A	Zip Code 23219-	Amount of Each Disburser Category/ Type Amount of Each Disburser Refund or Disposal of Contributions Required 11 C.F.R. 400.53					Exce	200.00					
	Office Sought:	House Senate President District:		nent For: Primary Other (spe	General ecify) 🔻	•		FUNE	DRAIS	SING	i SI	ERVI	CES	3			

1		
SUBTOTAL of Disbursements This Page (optional)	►	200.00
TOTAL This Period (last page this line number only)	•	5094.90
FEC Schedule B (Form 3) Rev. 02/2003		

SCHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE I		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	one)] 17 🛛 18 🗌 19a 🗍 19b	
			20a 20b 20c 21	
Any Information copied from such Reports and Stateme or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
Cantor Joint Fundraising Committee				
Full Name (Last, First, Middle Initial)			Transaction ID: 60630.E15	
A. 7th District Republican Committee		Date of Disbursement		
Mailing Address 5606 Boynton Place			$ \begin{array}{c} \stackrel{M}{\overset{O}{}}} \stackrel{M}{\overset{M}{}}} & \stackrel{M}{\overset{I}{}}} & \stackrel{D}{\overset{D}{}}} \stackrel{D}{\overset{D}{}}} \stackrel{D}{\overset{D}{}}} & \stackrel{D}{\overset{D}{}}} & \stackrel{D}{\overset{V}{}}} & \stackrel{V}{\overset{V}{}}} & \stackrel{V}{\overset{V}{}}} \stackrel{V}{\overset{V}{}}} \stackrel{V}{\overset{V}{}}} & \stackrel{V}{\overset{V}} & \stackrel{V}} & \stackrel{V}{\overset{V}} & \stackrel{V}} & \stackrel{V}{\overset{V}} & \stackrel{V} & \stackrel{V}$	
,	State Zip Code /A 23225-		Amount of Each Disbursement this Period	
Purpose of Disbursement TRANSFER TO JOINT FUNDRAISING PARTI	Г		17913.36 Refund or Disposal of Excess	
Candidate Name	C	Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
	Primary General	<u> </u>		
State: District:	Other (specify)			
Full Name (Last, First, Middle Initial)			Transaction ID: 60630.E13	
B. Cantor for Congress			Date of Disbursement	
Mailing Address P.O. Box 17813			$ \begin{array}{c} M & M \\ 0 & 6 \end{array} \right) \left(\begin{array}{c} D & D \\ 2 & 7 \end{array} \right) \left(\begin{array}{c} Y & Y \\ 2 & 0 & 0 \end{array} \right) \left(\begin{array}{c} Y \\ 2 & 0 & 0 \end{array} \right) $	
	State Zip Code /A 23226-		Amount of Each Disbursement this Period	
Purpose of Disbursement TRANSFER TO JOINT FUNDRAISING PARTI		11285.42 Refund or Disposal of Excess		
Candidate Name	C	Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
	nent For: 2006 Primary General Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) C. ERICPAC			Transaction ID: 60630.E14 Date of Disbursement	
Mailing Address 25 E. Main Street			$\begin{bmatrix} M & M \\ 0 & 6 \end{bmatrix} \begin{bmatrix} D & D \\ 2 & 7 \end{bmatrix} \begin{bmatrix} Y & Y & Y \\ 2 & 0 & 0 \end{bmatrix} \begin{bmatrix} Y \\ Y \end{bmatrix}$	
	State Zip Code /A 23219-		Amount of Each Disbursement this Period	
Purpose of Disbursement TRANSFER TO JOINT FUNDRAISING PARTI	Г		9115.22 Refund or Disposal of Excess	
Candidate Name	C	Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
President	nent For: 2006 Primary General Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)		►	38314.00	
TOTAL This Period (last page this line number only) .		►	38314.00	