

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 East Main Street

Check if different than previously reported. (ACC) Richmond VA 23219

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00420174

3. IS THIS REPORT X 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), X 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), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11) (Non-Election Year Only), Dec 20 (M12) (Non-Election Year Only), 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 1 1 2 3 2 0 1 0 through 1 2 3 1 2 0 1 0

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 0 1 1 8 2 0 1 1

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 table with 7 empty cells

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
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	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>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		92833.38
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	105318.83									
(c) Total Receipts (from Line 19)	9006.25	2347977.36								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	114325.08	2440810.74								
7. Total Disbursements (from Line 31)	56351.39	2382837.05								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	57973.69	57973.69								
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									

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Cantor Victory Fund

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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)	9000.00	2315967.15
(ii) Unitemized	0.00	7535.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	9000.00	2323502.15
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	20000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	9000.00	2343502.15
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	4250.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	6.25	225.21
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))	9006.25	2347977.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	9006.25	2347977.36

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	56351.39	428509.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	56351.39	428509.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	1952327.34
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	2000.00
(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	2000.00
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))..	56351.39	2382837.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	56351.39	2382837.05

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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	9000.00	2343502.15
34. Total Contribution Refunds (from Line 28(d))	0.00	2000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9000.00	2341502.15
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	56351.39	428509.71
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	4250.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	56351.39	424259.71

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

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

A.

Full Name (Last, First, Middle Initial) Thomas Minnick		Date of Receipt
Mailing Address 3673 Old Salon Lane		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
City	State	Zip Code
Marshall	VA	20115
FEC ID number of contributing federal political committee.		Transaction ID: 10113.C1102
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="9000.00"/>
Name of Employer National Counseling Group	Occupation President & CEO	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	NOTE: Joint Fundraising Proceed
		<input type="text" value="9000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="9000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="9000.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 16
	(check only one)
<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Cantor Victory Fund

A.

Full Name (Last, First, Middle Initial) Suntrust Bank		Date of Receipt MM / DD / YYYY 11 / 30 / 2010
Mailing Address 11501 West Broad Street		Transaction ID: 10113.C1103
City Richmond	State VA	Zip Code 23233-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.63
Name of Employer	Occupation	Interest Received
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.59	

B.

Full Name (Last, First, Middle Initial) Suntrust Bank		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address 11501 West Broad Street		Transaction ID: 10113.C1104
City Richmond	State VA	Zip Code 23233-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2.62
Name of Employer	Occupation	Interest Received
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.21	

SUBTOTAL of Receipts This Page (optional)	6.25
TOTAL This Period (last page this line number only)	6.25

**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) American Express	Transaction ID: 10113.E686 Date of Disbursement 11 / 23 / 2010
	Mailing Address 200 Vesey Street	Amount of Each Disbursement this Period 692.10
	City New York State NY Zip Code 10285-	
	Purpose of Disbursement CVF Credit Card Processing Fees	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) ▼
		CVF CREDIT CARD PROCESSING FEES

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 10113.E663 Date of Disbursement 12 / 18 / 2010
	Mailing Address 200 Vesey Street	Amount of Each Disbursement this Period 174.89
	City New York State NY Zip Code 10285-	
	Purpose of Disbursement CVF Printer Ink	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) ▼
		CVF PRINTER INK

C.	Full Name (Last, First, Middle Initial) Bankcard USA Merchant Services	Transaction ID: 10113.E659 Date of Disbursement 11 / 23 / 2010
	Mailing Address 5701 Lindero CYN. #3	Amount of Each Disbursement this Period 272.72
	City Thousand Oaks State CA Zip Code 91362-	
	Purpose of Disbursement CVF Credit Card Processing Fees	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) ▼
		CVF CREDIT CARD PROCESSING FEES

SUBTOTAL of Disbursements This Page (optional)	▶	1139.71
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)

<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) Bankcard USA Merchant Services Mailing Address 5701 Lindero CYN. #3 City Thousand Oaks State CA Zip Code 91362- Purpose of Disbursement CVF Credit Card Processing Fees 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: 10113.E660 Date of Disbursement 12 / 03 / 2010 Amount of Each Disbursement this Period 67.00 CVF CREDIT CARD PROCESSING FEES
B.	Full Name (Last, First, Middle Initial) Cathy Blaney & Assoc Mailing Address 150 Broadway City New York State NY Zip Code 10038-4311 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: 10113.E661 Date of Disbursement 12 / 03 / 2010 Amount of Each Disbursement this Period 2500.00 CVF FUNDRAISING CONSULTING
C.	Full Name (Last, First, Middle Initial) City Parking Inc. Mailing Address PO Box 630016 City Baltimore State MD Zip Code 21263-0016 Purpose of Disbursement CVF Parking 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: 10113.E665 Date of Disbursement 12 / 14 / 2010 Amount of Each Disbursement this Period 50.00 CVF PARKING

SUBTOTAL of Disbursements This Page (optional) ▶

2617.00

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)

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<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: 10113.E674 Date of Disbursement 11 / 30 / 2010
	Mailing Address 301 Virginia St Unit 1507	
	City Richmond State VA Zip Code 23219-4189	Amount of Each Disbursement this Period 2740.13
	Purpose of Disbursement CVF Salary	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.	Full Name (Last, First, Middle Initial) Allison Coccia	Transaction ID: 10113.E673 Date of Disbursement 11 / 30 / 2010
	Mailing Address 301 Virginia St Unit 1507	
	City Richmond State VA Zip Code 23219-4189	Amount of Each Disbursement this Period 3509.50
	Purpose of Disbursement CVF Salary	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) ▼

C.	Full Name (Last, First, Middle Initial) Allison Coccia	Transaction ID: 10113.E675 Date of Disbursement 12 / 31 / 2010
	Mailing Address 301 Virginia St Unit 1507	
	City Richmond State VA Zip Code 23219-4189	Amount of Each Disbursement this Period 2740.12
	Purpose of Disbursement CVF Salary	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) ▼

SUBTOTAL of Disbursements This Page (optional)	8989.75
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)

<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) Creative Direct	Transaction ID: 10113.E664 Date of Disbursement 12 / 03 / 2010
	Mailing Address 25 East Main Street	Amount of Each Disbursement this Period 150.00
	City Richmond State VA Zip Code 23219-	
	Purpose of Disbursement CVF Office Rent	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) ▼
		CVF OFFICE RENT

B.	Full Name (Last, First, Middle Initial) Creative Web Designs LLC	Transaction ID: 10113.E662 Date of Disbursement 12 / 08 / 2010
	Mailing Address 2803 Sagecreek Ct.	Amount of Each Disbursement this Period 450.00
	City Midlothian State VA Zip Code 23112-	
	Purpose of Disbursement CVF Event Photography	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) ▼
		CVF EVENT PHOTOGRAPHY

C.	Full Name (Last, First, Middle Initial) Department of Revenue Svcs - CT	Transaction ID: 10113.E685 Date of Disbursement 12 / 10 / 2010
	Mailing Address PO Box 2931	Amount of Each Disbursement this Period 307.92
	City Hartford State CT Zip Code 06104-2931	
	Purpose of Disbursement CVF Payroll Taxes	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) ▼
		CVF PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional)	907.92
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)

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<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Rose Ann Janis</p> <p>Mailing Address 5005 Amberwood Drive</p> <p>City State Zip Code Glen Allen VA 23059-</p> <p>Purpose of Disbursement CVF Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10113.E680</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 2340.54</p> <p>CVF SALARY</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Rose Ann Janis</p> <p>Mailing Address 5005 Amberwood Drive</p> <p>City State Zip Code Glen Allen VA 23059-</p> <p>Purpose of Disbursement CVF Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10113.E679</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 2042.75</p> <p>CVF SALARY</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Rose Ann Janis</p> <p>Mailing Address 5005 Amberwood Drive</p> <p>City State Zip Code Glen Allen VA 23059-</p> <p>Purpose of Disbursement CVF Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10113.E681</p> <p>Date of Disbursement 12 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 2340.55</p> <p>CVF SALARY</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6723.84

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 13 / 16

<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) McGuire Woods <hr/> Mailing Address 901 E. Cary Street <hr/> City Richmond State VA Zip Code 23219- <hr/> Purpose of Disbursement CVF Legal Services Candidate Name <hr/> 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: 10113.E668 Date of Disbursement 12 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 214.00 <hr/> CVF LEGAL SERVICES
B.	Full Name (Last, First, Middle Initial) Melissa Nelson <hr/> Mailing Address 977 Gorham Court <hr/> City Midlothian State VA Zip Code 23113- <hr/> Purpose of Disbursement CVF Salary Candidate Name <hr/> 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: 10113.E682 Date of Disbursement 11 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 3001.92 <hr/> CVF SALARY
C.	Full Name (Last, First, Middle Initial) Melissa Nelson <hr/> Mailing Address 977 Gorham Court <hr/> City Midlothian State VA Zip Code 23113- <hr/> Purpose of Disbursement CVF Salary Candidate Name <hr/> 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: 10113.E683 Date of Disbursement 12 / 06 / 2010 <hr/> Amount of Each Disbursement this Period 2282.50 <hr/> CVF SALARY

SUBTOTAL of Disbursements This Page (optional) ▶

5498.42

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)

<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) Melissa Nelson	Transaction ID: 10113.E684 Date of Disbursement 12 / 31 / 2010
	Mailing Address 977 Gorham Court	Amount of Each Disbursement this Period 3001.92
	City Midlothian State VA Zip Code 23113-	
	Purpose of Disbursement CVF Salary	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) ▼
		CVF SALARY

B.	Full Name (Last, First, Middle Initial) U.S. Treasury	Transaction ID: 10113.E687 Date of Disbursement 12 / 10 / 2010
	Mailing Address Internal Revenue Service	Amount of Each Disbursement this Period 12153.64
	City Austin State TX Zip Code 73301-0001	
	Purpose of Disbursement CVF Payroll Taxes	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) ▼
		CVF PAYROLL TAXES

C.	Full Name (Last, First, Middle Initial) Virginia Dept of Taxation	Transaction ID: 10113.E671 Date of Disbursement 11 / 23 / 2010
	Mailing Address PO Box 27264	Amount of Each Disbursement this Period 511.00
	City Richmond State VA Zip Code 23261-7264	
	Purpose of Disbursement CVF Payroll Taxes	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) ▼
		CVF PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional)	15666.56
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)

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<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

<p>A. Full Name (Last, First, Middle Initial) Virginia Dept of Taxation</p> <p>Mailing Address PO Box 27264</p> <p>City Richmond State VA Zip Code 23261-7264</p> <p>Purpose of Disbursement CVF Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10113.E672 Date of Disbursement 12 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 1449.00</p> <p>CVF PAYROLL TAXES</p>
<p>B. Full Name (Last, First, Middle Initial) Wiley Rein LLP</p> <p>Mailing Address 1776 K Street NW</p> <p>City Washington State DC Zip Code 20006-</p> <p>Purpose of Disbursement CVF Legal Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10113.E666 Date of Disbursement 12 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>CVF LEGAL SERVICES</p>
<p>C. Full Name (Last, First, Middle Initial) Wiley Rein LLP</p> <p>Mailing Address 1776 K Street NW</p> <p>City Washington State DC Zip Code 20006-</p> <p>Purpose of Disbursement CVF Legal Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10113.E667 Date of Disbursement 12 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>CVF LEGAL SERVICES</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5449.00

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)

<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) Kristin M. Young	Transaction ID: 10113.E676 Date of Disbursement 11 / 30 / 2010
	Mailing Address 902 Summer Hill Dr	
	City South Windsor State CT Zip Code 06074-2879	Amount of Each Disbursement this Period 3747.96
	Purpose of Disbursement CVF Salary	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) ▼
		CVF SALARY

B.	Full Name (Last, First, Middle Initial) Kristin M. Young	Transaction ID: 10113.E677 Date of Disbursement 11 / 30 / 2010
	Mailing Address 902 Summer Hill Dr	
	City South Windsor State CT Zip Code 06074-2879	Amount of Each Disbursement this Period 2798.12
	Purpose of Disbursement CVF Salary	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) ▼
		CVF SALARY

C.	Full Name (Last, First, Middle Initial) Kristin M. Young	Transaction ID: 10113.E678 Date of Disbursement 12 / 31 / 2010
	Mailing Address 902 Summer Hill Dr	
	City South Windsor State CT Zip Code 06074-2879	Amount of Each Disbursement this Period 2798.11
	Purpose of Disbursement CVF Salary	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) ▼
		CVF SALARY

SUBTOTAL of Disbursements This Page (optional)	9344.19
TOTAL This Period (last page this line number only)	56336.39