



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Cantor Victory Fund**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="81025.11"/>	<input type="text" value="81025.11"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="367986.88"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="226406.55"/>	<input type="text" value="635162.63"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="594393.43"/>	<input type="text" value="716187.74"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="542566.31"/>	<input type="text" value="664360.62"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="51827.12"/>	<input type="text" value="51827.12"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0"/>	

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:  /  /  To:  /  /

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).....	226400	630150
(ii) Unitemized .....	0	0
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	226400	630150
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	5000
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	226400	635150
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received .....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	6.55	12.63
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5) .....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	226406.55	635162.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	226406.55	635162.63

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures .....	30875.92	107670.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	30875.92	107670.23
22. Transfers to Affiliated/Other Party Committees.....	511690.39	511690.39
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0	0
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0	15000
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	30000
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	45000
29. Other Disbursements .....	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	542566.31	664360.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	542566.31	664360.62

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	226400	635150
34. Total Contribution Refunds (from Line 28(d)) .....	0	45000
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	226400	590150
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	30875.92	107670.23
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	30875.92	107670.23

**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 OF 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. Laura M. Fisher**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101A Clay Street  
 Suite 147  
 City San Francisco State CA Zip Code 94111-2033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2736-3526-c**  
 Amount of Each Receipt this Period  
 5000  
 Aggregate Year-to-Date ▼  
 5000

**B. Manuel D. Medina**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 501 Brickell Key Drive  
 Suite 200  
 City Miami State FL Zip Code 33131-2624  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Medina Capital Occupation Managing Partner  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2791-3524-c**  
 Amount of Each Receipt this Period  
 50000  
 Aggregate Year-to-Date ▼  
 50000

**C. Christopher Ruddy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 560 Village Boulevard  
 Suite 120  
 City West Palm Beach State FL Zip Code 33409-1963  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Newsmax Occupation CEO  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2792-3525-c**  
 Amount of Each Receipt this Period  
 10000  
 Aggregate Year-to-Date ▼  
 10000

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	65000.00
<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: (check only one)	PAGE 7 OF 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Cantor Victory Fund**

Full Name (Last, First, Middle Initial)  
**A. Alan I. Kirshner**

Mailing Address 15460 Campbell Lake Road

City State Zip Code  
Doswell VA 23047-2045

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

Name of Employer Occupation  
Markel Corp. Chairman & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**16000**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**03 / 20 / 2014**

**Transaction ID : 615-3527-c**

Amount of Each Receipt this Period  
**15000**

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

Mailing Address 11 Glendale Road

City State Zip Code  
Summit NJ 07901-3744

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

Name of Employer Occupation  
Gerson, Lehrman Group Chairman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**30000**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**03 / 20 / 2014**

**Transaction ID : 668-3528-c**

Amount of Each Receipt this Period  
**30000**

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

Mailing Address 15480 Campbell Lake Road

City State Zip Code  
Doswell VA 23047-2045

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

Name of Employer Occupation  
Self Employed Farm Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**15000**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**03 / 21 / 2014**

**Transaction ID : 278-3529-c**

Amount of Each Receipt this Period  
**15000**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>60000.00</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: (check only one)	PAGE 8 OF 19
<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

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NAME OF COMMITTEE (In Full)  
**Cantor Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. Louis C. Schroeder</b>		Date of Receipt 03 / 25 / 2014 <b>Transaction ID : 628-3537-c</b>
Mailing Address 332 Clovelly Road		Amount of Each Receipt this Period 5000
City Richmond	State VA	Zip Code 23221-3713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000
Name of Employer Chronos LC	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000	

Full Name (Last, First, Middle Initial) <b>B. Nily Falic</b>		Date of Receipt 03 / 26 / 2014 <b>Transaction ID : 2793-3530-c</b>
Mailing Address 9999 Collins Avenue Apt. 3A		Amount of Each Receipt this Period 7200
City Bal Harbour	State FL	Zip Code 33154-1832
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7200
Name of Employer Duty Free Americas	Occupation Management Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7200	

Full Name (Last, First, Middle Initial) <b>C. Gila Falic</b>		Date of Receipt 03 / 26 / 2014 <b>Transaction ID : 2794-3531-c</b>
Mailing Address 145 Biscay Drive		Amount of Each Receipt this Period 7200
City Bal Harbour	State FL	Zip Code 33154-1322
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7200
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7200	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	19400.00
<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 9 OF 19
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cantor Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. Jana Falic</b>		Date of Receipt MM / DD / YYYY 03 / 26 / 2014 <b>Transaction ID : 2795-3532-c</b>
Mailing Address 150 Harbour Way		Amount of Each Receipt this Period 7200
City Bal Harbour	State FL	Zip Code 33154-1333
FEC ID number of contributing federal political committee. C	Name of Employer Homemaker	Occupation Homemaker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7200	

Full Name (Last, First, Middle Initial) <b>B. Simon Falic</b>		Date of Receipt MM / DD / YYYY 03 / 26 / 2014 <b>Transaction ID : 2796-3533-c</b>
Mailing Address 150 Harbour Way		Amount of Each Receipt this Period 7200
City Bal Harbour	State FL	Zip Code 33154-1333
FEC ID number of contributing federal political committee. C	Name of Employer Duty Free Americas	Occupation Chairman
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7200	

Full Name (Last, First, Middle Initial) <b>C. Jerome Falic</b>		Date of Receipt MM / DD / YYYY 03 / 26 / 2014 <b>Transaction ID : 2797-3534-c</b>
Mailing Address 209 Bal Bay Drive		Amount of Each Receipt this Period 7200
City Bal Harbour	State FL	Zip Code 33154-1368
FEC ID number of contributing federal political committee. C	Name of Employer Duty Free Americas	Occupation CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7200	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	21600.00
<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: (check only one)	PAGE 10 OF 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Cantor Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. Debbie Falic</b>		Date of Receipt 03 / 26 / 2014 <b>Transaction ID : 2798-3535-c</b>
Mailing Address 209 Bal Bay Drive		Amount of Each Receipt this Period 7200
City Bal Harbour	State FL	Zip Code 33154-1368
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7200
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7200	

Full Name (Last, First, Middle Initial) <b>B. Leon Falic</b>		Date of Receipt 03 / 26 / 2014 <b>Transaction ID : 2799-3536-c</b>
Mailing Address 116 Bal Bay Drive		Amount of Each Receipt this Period 7200
City Bal Harbour	State FL	Zip Code 33154-1311
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7200
Name of Employer Duty Free Americas	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7200	

Full Name (Last, First, Middle Initial) <b>C. Richard N. Merkin</b>		Date of Receipt 03 / 27 / 2014 <b>Transaction ID : 2201-3539-c</b>
Mailing Address 3115 Ocean Front Walk Suite 301		Amount of Each Receipt this Period 11000
City Marina Del Rey	State CA	Zip Code 90292-5142
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11000
Name of Employer Heritage Provider Network	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 11000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25400.00
<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 11 OF 19  
(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"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Cantor Victory Fund**

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

Mailing Address 12 Windsor Drive

City Old Westbury State NY Zip Code 11568-1500

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

Name of Employer J. Goldman & Co. L.P. Occupation Finance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
35000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : 2416-3538-c**

Amount of Each Receipt this Period  
35000

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	226400.00

**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**

Full Name (Last, First, Middle Initial)

**A. Suntrust Merchant Services, LLC**

Mailing Address 4000 Coral Ridge Drive

City State Zip Code  
Coral Springs FL 33065-7614

Purpose of Disbursement  
CVF Credit Card Processing Fees

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B-2194-3540-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Creative Direct LLC**

Mailing Address 25 E Main Street

City State Zip Code  
Richmond VA 23219-2109

Purpose of Disbursement  
CVF Office Rent

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B-1635-3544-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Creative Direct LLC**

Mailing Address 25 E Main Street

City State Zip Code  
Richmond VA 23219-2109

Purpose of Disbursement  
CVF Parking

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B-1635-3545-e**

Amount of Each Disbursement this Period

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

**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**

Full Name (Last, First, Middle Initial)

**A. The Woods Herberger Group**

Mailing Address 6600 SW 63rd Avenue

City South Miami State FL Zip Code 33143-3323

Purpose of Disbursement  
CVF Fundraising Consulting

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-2788-3542-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address 200 Vesey Street

City New York State NY Zip Code 10285-1000

Purpose of Disbursement  
CVF Credit Card Charges

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-1671-3553-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Mar-A-Lago Club**

Mailing Address 1100 S Ocean Boulevard

City Palm Beach State FL Zip Code 33480-5004

Purpose of Disbursement  
CVF Food & Beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-2803-2128-V**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Subitemization of American Express ( 03/18/14 )

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

**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**

Full Name (Last, First, Middle Initial)

**A. Cafe Luxembourg**

Mailing Address 200 W 70th Street

City New York State NY Zip Code 10023-4323

Purpose of Disbursement  
CVF Food & Beverage

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	19	/	2014

Transaction ID : SB21B-2804-2129-V

Amount of Each Disbursement this Period

480.85
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[MEMO ITEM]

Subitemization of American Express ( 03/18/14 )

Full Name (Last, First, Middle Initial)

**B. Intuit**

Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043-1126

Purpose of Disbursement  
CVF Software

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	04	/	2014

Transaction ID : SB21B-2237-2123-V

Amount of Each Disbursement this Period

9.95
------

[MEMO ITEM]

Subitemization of American Express ( 03/18/14 )

Full Name (Last, First, Middle Initial)

**C. Chicago Cut Steakhouse**

Mailing Address 300 N La Salle Drive

City Chicago State IL Zip Code 60654-3406

Purpose of Disbursement  
CVF Food & Beverage

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	13	/	2014

Transaction ID : SB21B-2243-2126-V

Amount of Each Disbursement this Period

864.12
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[MEMO ITEM]

Subitemization of American Express ( 03/18/14 )

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

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

0.00
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**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**

Full Name (Last, First, Middle Initial)

**A. Loews Hotel**

Mailing Address 667 Madison Avenue  
Floor 6

City New York State NY Zip Code 10065-8029

Purpose of Disbursement CVF Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 19 / 2014

Transaction ID : **SB21B-2060-2130-V**

Amount of Each Disbursement this Period: 284.7

**[MEMO ITEM]**  
Subitemization of American Express ( 03/18/14 )

Full Name (Last, First, Middle Initial)

**B. idonatepro**

Mailing Address 2033 San Elijo Avenue  
# 203

City Cardiff By The Sea State CA Zip Code 92007-1726

Purpose of Disbursement CVF Software

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
03 / 01 / 2014

Transaction ID : **SB21B-2075-2124-V**

Amount of Each Disbursement this Period: 250

**[MEMO ITEM]**  
Subitemization of American Express ( 03/18/14 )

Full Name (Last, First, Middle Initial)

**C. Wiley Rein LLP**

Mailing Address 1776 K Street NW

City Washington State DC Zip Code 20006-2304

Purpose of Disbursement CVF Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
03 / 20 / 2014

Transaction ID : **SB21B-1707-3547-e**

Amount of Each Disbursement this Period: 3750

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3750.00

**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**

Full Name (Last, First, Middle Initial)

**A. Suntrust Merchant Services, LLC**

Mailing Address 4000 Coral Ridge Drive

City State Zip Code  
Coral Springs FL 33065-7614

Purpose of Disbursement  
CVF Credit Card Processing Fees

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B-2194-3541-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Kristin M. Young**

Mailing Address 12407 Tiverton Lane

City State Zip Code  
Glen Allen VA 23059-7017

Purpose of Disbursement  
CVF Payroll

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B-1209-3554-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Melissa Nelson**

Mailing Address 977 Gorham Court

City State Zip Code  
Midlothian VA 23114-4648

Purpose of Disbursement  
CVF Payroll

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B-1713-3555-e**

Amount of Each Disbursement this Period

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

**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:  
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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**

Full Name (Last, First, Middle Initial)

**A. Rose Ann Janis**

Mailing Address 5005 Amberwood Drive

City State Zip Code  
Glen Allen VA 23059-7530

Purpose of Disbursement  
CVF Payroll

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : SB21B-982-3556-e**

Amount of Each Disbursement this Period

2649.11
---------

Full Name (Last, First, Middle Initial)

**B. William C. Cole**

Mailing Address 301 S Boulevard  
Apt. 5

City State Zip Code  
Richmond VA 23220-5764

Purpose of Disbursement  
CVF Payroll

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : SB21B-2733-3557-e**

Amount of Each Disbursement this Period

1841.97
---------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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

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

4491.08
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30819.46
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
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<input type="checkbox"/> 21b	<input checked="" 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**

Full Name (Last, First, Middle Initial)

**A. 7th District Republican Committee**

Mailing Address 25 E Main Street

City Richmond State VA Zip Code 23219-2109

Purpose of Disbursement  
Transfer to Joint Fundraising Participant

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB22-986-3550-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Cantor for Congress**

Mailing Address PO Box 17813

City Richmond State VA Zip Code 23226-7813

Purpose of Disbursement  
Transfer to Joint Fundraising Participant

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB22-984-3548-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Every Republican Is Crucial (ERICPAC)**

Mailing Address 25 E Main Street  
Suite 200

City Richmond State VA Zip Code 23219-2109

Purpose of Disbursement  
Transfer to Joint Fundraising Participant

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB22-6-3549-e**

Amount of Each Disbursement this Period

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

**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 type="checkbox"/> 21b	<input checked="" 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**

Full Name (Last, First, Middle Initial)

**A. National Republican Congressional Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2014

Mailing Address 320 1st Street SE

**Transaction ID : SB22-8-3551-e**

City Washington State DC Zip Code 20003-1838

Amount of Each Disbursement this Period

109142.25
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Purpose of Disbursement  
Transfer to Joint Fundraising Participant

011
Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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

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

109142.25
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511690.39
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