

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 378 OF 378	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cantor for Congress

Full Name (Last, First, Middle Initial) A. MartinAir		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 5733 Huntsman Road		Amount of Each Disbursement this Period 2000 Transaction ID : B-E-78780
City Richmond State VA Zip Code 23250-2416	Purpose of Disbursement Political Contribution: In Kind: Airfare 011 Category/Type	
Candidate Name Mr. David Cheston Rouzer	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 07		

Full Name (Last, First, Middle Initial) B. Wagner For Senate		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2014
Mailing Address PO Box 68008		Amount of Each Disbursement this Period 5000 Transaction ID : B-E-77988
City Virginia Beach State VA Zip Code 23471-8008	Purpose of Disbursement Non Federal Contribution 011 Category/Type	
Candidate Name The Hon. Frank Wagner	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / 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: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7000.00
TOTAL This Period (last page this line number only).....	24500.00