	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sched for each category o Detailed Summary F	ule(s) f the	FOR LINE NUMBER: PAGE 350 OF 451 (check only one)
	ly information copied from such Reports and Statements r for commercial purposes, other than using the name and			erson for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) Cantor for Congress			
۹.	Full Name (Last, First, Middle Initial) Mrs. Maxine Silver Mailing Address 1201 Central Park Boulevard			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Fredericksburg VA Purpose of Disbursement General Election Contrib. Refund Candidate Name Office Sought: House Disbursement Formary Senate Primary	or: 2014	010 Category/ Type	Amount of Each Disbursement this Period 2600 Transaction ID : B-E-80730
3.	State: District: Full Name (Last, First, Middle Initial) Mr. Larry Silverstein Mailing Address 250 Greenwich Street			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State New York NY Purpose of Disbursement General Election Contrib. Refund Candidate Name Office Sought: House Senate Primary President State: District:	or: 2014	010 Category/ Type	Amount of Each Disbursement this Period 2600 Transaction ID : B-E-81099
Э.	Full Name (Last, First, Middle Initial) Mrs. Annette Simmons Mailing Address 5430 LBJ Freeway Suite 1700 City State Zip Code			Date of Disbursement M M / D D / Y Y Y Y Y O8 06 2014 Amount of Each Disbursement this Period
	Purpose of Disbursement General Election Contrib. Refund Candidate Name Office Sought: House Disbursement Formula Senate Primary	or: 2014	010 Category/ Type	Transaction ID : B-E-81100
.5	UBTOTAL of Disbursements This Page (optional)			7800.00
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TOTAL This Period (last page this line number only).....