

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5
COX ALOMAR 2012 INC

ADDRESS (number and street) 403 AVENIDA CONSTITUCION
 Check if different than previously reported. (ACC) SAN JUAN PR 00906

2. **FEC IDENTIFICATION NUMBER** ▼ C C00506212 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT
PR 00

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2013 through M M / D D / Y Y Y Y 03 / 31 / 2013

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 Javier J Lamboy Hernandez

Signature of Treasurer Javier J Lamboy Hernandez [Electronically Filed] Date M M / D D / Y Y Y Y 04 / 22 / 2013

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									
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
COX ALOMAR 2012 INC

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

	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))....	0.00	773133.36
(b) Total Contribution Refunds (from Line 20(d))	0.00	3671.45
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	769461.91
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	2856.57	747489.83
(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)).....	2856.57	747489.83
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2187.75	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	100.01	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	131210.71	

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 3 (Revised 12/2003)

Write or Type Committee Name

COX ALOMAR 2012 INC

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	510028.83
(ii) Unitemized.....	0.00	258604.53
(iii) TOTAL of contributions from individuals ▶	0.00	768633.36
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	4500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	773133.36
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	2356.13
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	0.00	775489.49

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2856.57	747489.83
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	3671.45
(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 20(a), (b), and (c)).....	0.00	3671.45
21. OTHER DISBURSEMENTS	0.00	7521.53
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	2856.57	758682.81

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5044.32
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	5044.32
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2856.57
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2187.75

**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 5 OF 30			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2013
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 103.00 Transaction ID : SB17.11005
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Bank fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2013
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.11006
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement American Express Colection fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2013
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.11008
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Banck fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	168.00
TOTAL This Period (last page this line number only).....	

**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 6 OF 30			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Banco Popular de Puerto Rico			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2013
Mailing Address P.O. Box 362708			Amount of Each Disbursement this Period 10.00 Transaction ID : SB17.11012
City San Juan	State PR	Zip Code 00936-2708	
Purpose of Disbursement Bank service fee		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Banco Popular de Puerto Rico			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2013
Mailing Address P.O. Box 362708			Amount of Each Disbursement this Period 103.00 Transaction ID : SB17.11000
City San Juan	State PR	Zip Code 00936-2708	
Purpose of Disbursement Bank fee		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. Banco Popular de Puerto Rico			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2013
Mailing Address P.O. Box 362708			Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.11002
City San Juan	State PR	Zip Code 00936-2708	
Purpose of Disbursement American Express Collection fee		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	128.00
TOTAL This Period (last page this line number only).....	

**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 7 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2013
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.11003
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Bank fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2013
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 10.00 Transaction ID : SB17.11004
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Bank service fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2013
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 103.00 Transaction ID : SB17.10996
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Bank fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	163.00
TOTAL This Period (last page this line number only).....	

**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 8 OF 30			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Banco Popular de Puerto Rico			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2013
Mailing Address P.O. Box 362708			Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.10997
City San Juan	State PR	Zip Code 00936-2708	
Purpose of Disbursement American Express Collection fee		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. Banco Popular de Puerto Rico			Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2013
Mailing Address P.O. Box 362708			Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.10998
City San Juan	State PR	Zip Code 00936-2708	
Purpose of Disbursement Bank fee		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) C. Banco Popular de Puerto Rico			Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2013
Mailing Address P.O. Box 362708			Amount of Each Disbursement this Period 10.00 Transaction ID : SB17.10999
City San Juan	State PR	Zip Code 00936-2708	
Purpose of Disbursement Bank service fee		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**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 9 OF 30			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Claro PRT		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2013
Mailing Address PO Box 70366		Amount of Each Disbursement this Period 1354.82
City San Juan	State PR	
Zip Code 00936-8366	Purpose of Disbursement Telephones rental	Transaction ID : SB17.11011
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. One Link Communications		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2013
Mailing Address PO Box 192296		Amount of Each Disbursement this Period 691.23
City San Juan	State PR	
Zip Code 00919-2296	Purpose of Disbursement Internet for office rental	Transaction ID : SB17.11009
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. One Link Communications		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2013
Mailing Address PO Box 192296		Amount of Each Disbursement this Period 138.26
City San Juan	State PR	
Zip Code 00919-2296	Purpose of Disbursement Internet for office rental	Transaction ID : SB17.11010
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2184.31
TOTAL This Period (last page this line number only).....	

**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 10 OF 30		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. One Link Communications		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2013
Mailing Address PO Box 192296		Amount of Each Disbursement this Period 138.26
City San Juan State PR Zip Code 00919-2296	Purpose of Disbursement Internet for office rental	
Candidate Name	Category/Type 001	Transaction ID : SB17.11001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		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	
Candidate Name	Category/Type	
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:		

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	
Candidate Name	Category/Type	
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).....	138.26
TOTAL This Period (last page this line number only).....	2856.57

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Pedro Clemente Quinones

Mailing Address Urb. Country Club
1100 Carmen Busello St.

City State Zip Code
San Juan PR 00924

Nature of Debt (Purpose):
overpayment

Outstanding Balance Beginning This Period **Transaction ID : SD9.4979**
100.01

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 100.01

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	100.01
2) TOTALS This Period (last page this line number only)	100.01
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	100.01

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Carmen E. Acevedo Betancourt

Nature of Debt (Purpose):
Professional services-Media advisor

Mailing Address Urb. Roosevelt
Canals St. #451

City State Zip Code
San Juan PR 00918

Outstanding Balance Beginning This Period

98.00

Transaction ID : SD10.7470

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

98.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Karenin Biaggi Velazquez

Nature of Debt (Purpose):
Professional services-Issues asisstant

Mailing Address Tintillo Gardens
6 St. M-21

City State Zip Code
Guaynabo PR 00966

Outstanding Balance Beginning This Period

1500.00

Transaction ID : SD10.7202

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Caguas Expressway Motors

Nature of Debt (Purpose):
Car Rental

Mailing Address P.O Box 50045

City State Zip Code
San Juan PR 00902

Outstanding Balance Beginning This Period

1460.00

Transaction ID : SD10.9862

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1460.00

- 1) **SUBTOTALS** This Period This Page (optional) ▶
- 2) **TOTALS** This Period (last page this line number only) ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

3058.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Luis Calderon Navarro	Nature of Debt (Purpose): hotel room expense
Mailing Address PO Box 315	
City State Zip Code Loiza PR 00772	

Outstanding Balance Beginning This Period 130.80	Transaction ID : SD10.5018	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 130.80

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Central 12	Nature of Debt (Purpose): Campaign Media and Promotion
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406	
City State Zip Code Guaynabo PR 00968	

Outstanding Balance Beginning This Period 5000.00	Transaction ID : SD10.4976	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Central 12	Nature of Debt (Purpose): Advertising Consulting Services
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406	
City State Zip Code Guaynabo PR 00968	

Outstanding Balance Beginning This Period 18000.00	Transaction ID : SD10.5770	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 18000.00

1) SUBTOTALS This Period This Page (optional)	23130.80
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Central 12

Mailing Address Centro Intl de Mercadeo Torre 1
 Suite 406

City State Zip Code
 Guaynabo PR 00968

Nature of Debt (Purpose):
 Campaign Media and Promotion

Outstanding Balance Beginning This Period **Transaction ID : SD10.7212**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Central 12

Mailing Address Centro Intl de Mercadeo Torre 1
 Suite 406

City State Zip Code
 Guaynabo PR 00968

Nature of Debt (Purpose):
 Campaign Media and Promotion

Outstanding Balance Beginning This Period **Transaction ID : SD10.7213**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Central 12

Mailing Address Centro Intl de Mercadeo Torre 1
 Suite 406

City State Zip Code
 Guaynabo PR 00968

Nature of Debt (Purpose):
 Campaign Media and Promotion

Outstanding Balance Beginning This Period **Transaction ID : SD10.7214**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="1950.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Central 12	Nature of Debt (Purpose): Campaign Media and Promotion-Social Media
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406	
City State Zip Code Guaynabo PR 00968	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="2160.00"/>	Transaction ID : SD10.7215
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="2160.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Central 12	Nature of Debt (Purpose): Campaign Media and Promotion-Social Media
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406	
City State Zip Code Guaynabo PR 00968	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="2160.00"/>	Transaction ID : SD10.7216
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="2160.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Central 12	Nature of Debt (Purpose): Campaign Media and Promotion-Social Media
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406	
City State Zip Code Guaynabo PR 00968	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="2160.00"/>	Transaction ID : SD10.7217
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="2160.00"/>	

1) SUBTOTALS This Period This Page (optional) ▶	<input style="width:100%;" type="text" value="6480.00"/>
2) TOTALS This Period (last page this line number only) ▶	<input style="width:100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	<input style="width:100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%;" type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 30
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Central 12		Nature of Debt (Purpose): Public Relations Expenses-Advertising
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406		
City Guaynabo	State PR	Zip Code 00968

Outstanding Balance Beginning This Period 7328.00	Transaction ID : SD10.10936	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7328.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Claro PRT		Nature of Debt (Purpose): Administrative expenses-Telephone services for campaign staff
Mailing Address PO Box 70366		
City San Juan	State PR	Zip Code 00936-8366

Outstanding Balance Beginning This Period 432.94	Transaction ID : SD10.7208	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 432.94

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pedro Clemente Quinones		Nature of Debt (Purpose): Campaign Jingle
Mailing Address Urb. Country Club 1100 Carmen Busello St.		
City San Juan	State PR	Zip Code 00924

Outstanding Balance Beginning This Period -100.01	Transaction ID : SD10.4256	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period -100.01

1) SUBTOTALS This Period This Page (optional)	7660.93
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : SD10.4256

Mr. Pedro Quinones Clemente received in excess of payment a total of \$100.01 He has been requested to reimbursed same amount to Cox Alomar 2012 Inc. This debt was reported on line 9 as a debt owed to the committee.

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jose Cruz

Nature of Debt (Purpose):
Professional services- Media advisor

Mailing Address PO Box 443

City State Zip Code
Juncos PR 00777

Outstanding Balance Beginning This Period

140.00

Transaction ID : SD10.7477

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

140.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jose Cruz

Nature of Debt (Purpose):
Salary

Mailing Address PO Box 443

City State Zip Code
Juncos PR 00777

Outstanding Balance Beginning This Period

140.00

Transaction ID : SD10.9854

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

140.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Eastern America Insurance Agency, Inc.

Nature of Debt (Purpose):
Insurance

Mailing Address PO Box 193900

City State Zip Code
San Juan PR 00919

Outstanding Balance Beginning This Period

1227.00

Transaction ID : SD10.7490

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1227.00

- 1) **SUBTOTALS** This Period This Page (optional) ▶
- 2) **TOTALS** This Period (last page this line number only) ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

1507.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Facilities Management and Janitorial Services

Mailing Address PO Box 366586

City State Zip Code
 San Juan PR 00936-6586

Nature of Debt (Purpose):
 janitorial services - committee's offices

Outstanding Balance Beginning This Period **Transaction ID : SD10.5774**
 220.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
 0.00 0.00 220.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Carl Gibbs Acosta

Mailing Address Cape Village B-4 Buzon 110

City State Zip Code
 Carolina PR 00979

Nature of Debt (Purpose):
 Professional services- Statistics analyst

Outstanding Balance Beginning This Period **Transaction ID : SD10.7472**
 140.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
 0.00 0.00 140.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Carl Gibbs Acosta

Mailing Address Cape Village B-4 Buzon 110

City State Zip Code
 Carolina PR 00979

Nature of Debt (Purpose):
 Salary

Outstanding Balance Beginning This Period **Transaction ID : SD10.9855**
 140.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
 0.00 0.00 140.00

1) SUBTOTALS This Period This Page (optional)	500.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Richard Guzman Rivera		Nature of Debt (Purpose): Field Operations Expenses-Vehicle Rental
Mailing Address 112 Paris St. Urb. Floral Park		
City	State	Zip Code
Hato Rey	PR	00917

Outstanding Balance Beginning This Period	Transaction ID : SD10.10276	
<input type="text" value="300.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="300.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Richard Guzman Rivera		Nature of Debt (Purpose): Sound Vehicle Rental
Mailing Address 112 Paris St. Urb. Floral Park		
City	State	Zip Code
Hato Rey	PR	00917

Outstanding Balance Beginning This Period	Transaction ID : SD10.10932	
<input type="text" value="4000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="4000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Miguel Hernandez Agosto		Nature of Debt (Purpose): Professional services-Campaign director
Mailing Address Apartado 367746		
City	State	Zip Code
San Juan	PR	00936-7746

Outstanding Balance Beginning This Period	Transaction ID : SD10.7482	
<input type="text" value="350.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="350.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="4650.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 30
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Miguel Hernandez Agosto		Nature of Debt (Purpose): Salary
Mailing Address Apartado 367746		
City State	Zip Code	
San Juan	PR 00936-7746	

Outstanding Balance Beginning This Period	Transaction ID : SD10.9858	
<input type="text" value="350.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="350.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Imperial Credit Corporation		Nature of Debt (Purpose): insurance premium
Mailing Address PO Box 9777		
City State	Zip Code	
San Juan	PR 00908-0777	

Outstanding Balance Beginning This Period	Transaction ID : SD10.5754	
<input type="text" value="499.10"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="499.10"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Javier J Lamboy Hernandez		Nature of Debt (Purpose): Professional services- Assistant treasurer, Compliance advisory
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		
City State	Zip Code	
San Juan	PR 00917	

Outstanding Balance Beginning This Period	Transaction ID : SD10.7476	
<input type="text" value="175.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="175.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="1024.10"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Javier J Lamboy Hernandez

Mailing Address Carmen St. # 5
Isabelle Bldg Apt # 2

City State Zip Code
San Juan PR 00917

Nature of Debt (Purpose):
Salary

Outstanding Balance Beginning This Period **Transaction ID : SD10.9853**
210.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 210.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Israel Morales Alicea

Mailing Address Terranova 4B9 St.

City State Zip Code
Guaynabo PR 00969

Nature of Debt (Purpose):
Salary

Outstanding Balance Beginning This Period **Transaction ID : SD10.9860**
140.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 140.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Ernesto Morales Ramos

Mailing Address 2 Cond. San Francisco
VLG Apt. 109

City State Zip Code
Carolina PR 00987-6950

Nature of Debt (Purpose):
Reimbursement of meals and gasoline expenses

Outstanding Balance Beginning This Period **Transaction ID : SD10.7186**
107.03

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 107.03

1) SUBTOTALS This Period This Page (optional)	▶	457.03
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Ernesto Morales Ramos

Nature of Debt (Purpose):
Professional services- Media Advisor

Mailing Address 2 Cond. San Francisco
VLG Apt. 109

City State Zip Code
Carolina PR 00987-6950

Outstanding Balance Beginning This Period

385.50

Transaction ID : SD10.7475

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

385.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Ernesto Morales Ramos

Nature of Debt (Purpose):
Salary

Mailing Address 2 Cond. San Francisco
VLG Apt. 109

City State Zip Code
Carolina PR 00987-6950

Outstanding Balance Beginning This Period

228.00

Transaction ID : SD10.9856

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

228.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Ivonne Otero Santiago

Nature of Debt (Purpose):
Salary

Mailing Address Calle 2 #77 Urb. Paseo Alto

City State Zip Code
San Juan PR 00926

Outstanding Balance Beginning This Period

140.00

Transaction ID : SD10.9859

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

140.00

- 1) **SUBTOTALS** This Period This Page (optional) ▶
- 2) **TOTALS** This Period (last page this line number only) ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

753.50

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 24 OF 30
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Partido Popular Democratico Inc.	Nature of Debt (Purpose): Office Rent
Mailing Address 403 Constitucion Ave.	
City State Zip Code San Juan PR 00906	

Outstanding Balance Beginning This Period 5700.00	Transaction ID : SD10.10933	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5700.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pitney Bowes	Nature of Debt (Purpose): equipment and postage meter rental
Mailing Address 362 Avenida de la Constitucion	
City State Zip Code San Juan PR 00901	

Outstanding Balance Beginning This Period 351.00	Transaction ID : SD10.5772	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 351.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Restaurante Antonio	Nature of Debt (Purpose): Fundraising Expenses
Mailing Address 1406 Magdalena Ave.	
City State Zip Code San Juan PR 00907	

Outstanding Balance Beginning This Period 1000.00	Transaction ID : SD10.9641	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

1) SUBTOTALS This Period This Page (optional)	7051.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Ricoh PR

Mailing Address National Plaza Bldg suite 1700
431 Ponce de Leon Ave.

City State Zip Code
San Juan PR 00917

Nature of Debt (Purpose):
copy machine

Outstanding Balance Beginning This Period **Transaction ID : SD10.4971**
2745.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 2745.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Ricoh PR

Mailing Address National Plaza Bldg suite 1700
431 Ponce de Leon Ave.

City State Zip Code
San Juan PR 00917

Nature of Debt (Purpose):
Office expenses-Printing services

Outstanding Balance Beginning This Period **Transaction ID : SD10.7204**
305.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 305.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
A. Miguel Rios

Mailing Address Valle Verde II
Ap-1 Rio Maravilla Street

City State Zip Code
Bayamon PR 00961

Nature of Debt (Purpose):
Professional services-Sound vehicles for campaign activities.

Outstanding Balance Beginning This Period **Transaction ID : SD10.7196**
3250.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 3250.00

1) SUBTOTALS This Period This Page (optional)	▶	6300.00
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 26 OF 30
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor A. Miguel Rios		Nature of Debt (Purpose): Rental_Sound Vehicle
Mailing Address Valle Verde II Ap-1 Rio Maravilla Street		
City Bayamon	State PR	Zip Code 00961

Outstanding Balance Beginning This Period 11700.00	Transaction ID : SD10.9849	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11700.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor A. Miguel Rios		Nature of Debt (Purpose): Sound Vehicle Rental
Mailing Address Valle Verde II Ap-1 Rio Maravilla Street		
City Bayamon	State PR	Zip Code 00961

Outstanding Balance Beginning This Period 3250.00	Transaction ID : SD10.10273	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor A. Miguel Rios		Nature of Debt (Purpose): Field Operations Vehicle Rental
Mailing Address Valle Verde II Ap-1 Rio Maravilla Street		
City Bayamon	State PR	Zip Code 00961

Outstanding Balance Beginning This Period 8750.00	Transaction ID : SD10.10935	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8750.00

1) SUBTOTALS This Period This Page (optional)	23700.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 27 OF 30
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carmen Angeles Rodriguez Weber		Nature of Debt (Purpose): Professional serices- Fundraiser coordinator
Mailing Address Cond. Torre de los Frailes Apt. 11 J		
City State	Zip Code	
Guaynabo	PR 00969	

Outstanding Balance Beginning This Period	Transaction ID : SD10.7471	
140.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	140.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sami Abu Osba/Shell Abuosba		Nature of Debt (Purpose): Gas Expenses
Mailing Address Urb. San Agustin 1426 Luisa Capetilo St.		
City State	Zip Code	
San Juan	PR 00921	

Outstanding Balance Beginning This Period	Transaction ID : SD10.9851	
1970.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1970.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sami Abu Osba/Shell Abuosba		Nature of Debt (Purpose): Gas Expenses
Mailing Address Urb. San Agustin 1426 Luisa Capetilo St.		
City	State	Zip Code
San Juan	PR	00921

Outstanding Balance Beginning This Period	Transaction ID : SD10.9850	
1970.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1970.00

1) SUBTOTALS This Period This Page (optional)	▶	4080.00
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 28 OF 30
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Christopher Sanchez Ortiz	Nature of Debt (Purpose): Reimbursements for travel and meal expenses.
Mailing Address PO Box 194555	
City State Zip Code San Juan PR 00919	

Outstanding Balance Beginning This Period -0.10	Transaction ID : SD10.7199	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period -0.10

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Christopher Sanchez Ortiz	Nature of Debt (Purpose): Professional services- Candidate assistant
Mailing Address PO Box 194555	
City State Zip Code San Juan PR 00919	

Outstanding Balance Beginning This Period 105.00	Transaction ID : SD10.7473	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 105.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Christopher Sanchez Ortiz	Nature of Debt (Purpose): Salary
Mailing Address PO Box 194555	
City State Zip Code San Juan PR 00919	

Outstanding Balance Beginning This Period 1500.00	Transaction ID : SD10.9857	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

1) SUBTOTALS This Period This Page (optional)	1604.90
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 29 OF 30
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Edgardo Miguel Vazquez Rivera		Nature of Debt (Purpose): Professional services-Political director
Mailing Address Tabonuco St. B-5 suite 216 PMB-112		
City State	Zip Code	
Guaynabo	PR 00968-3022	

Outstanding Balance Beginning This Period	Transaction ID : SD10.7474	
<input type="text" value="175.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="175.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Edgardo Miguel Vazquez Rivera		Nature of Debt (Purpose): Salary
Mailing Address Tabonuco St. B-5 suite 216 PMB-112		
City State	Zip Code	
Guaynabo	PR 00968-3022	

Outstanding Balance Beginning This Period	Transaction ID : SD10.9852	
<input type="text" value="2675.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2675.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Vias Car Rental of P.R.		Nature of Debt (Purpose): Vehicles Rental
Mailing Address Urb. Costa de Oro C-2 Marginal St.		
City	State	Zip Code
Dorado	PR	00646-2055

Outstanding Balance Beginning This Period	Transaction ID : SD10.9863	
<input type="text" value="10787.66"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="10787.66"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="13637.66"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Vias Car Rental of P.R.

Nature of Debt (Purpose):
Vehicle Rentals

Mailing Address Urb. Costa de Oro C-2 Marginal St.

City State Zip Code
Dorado PR 00646-2055

Outstanding Balance Beginning This Period

21862.79

Transaction ID : SD10.10934

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

21862.79

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Vias Car Rental of PR

Nature of Debt (Purpose):
Campaign vehicles rental.

Mailing Address Isla Verde

City State Zip Code
Carolina PR 00979

Outstanding Balance Beginning This Period

1803.00

Transaction ID : SD10.7201

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1803.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶

23665.79

2) **TOTALS** This Period (last page this line number only) ▶

131210.71

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

131210.71