02/22/2013 20 : 04

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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

| FORM 3 | , | For An A | uthori | zed Comi | nittee | | | Office Use Only |
|--|------------------|----------------------------|-----------|--------------------|---|----------------|--------------------------|--|
| 1. NAME OF COMMITTEE (in | | TYPE OR PRINT | ▼ | | mple: If typing or the lines. | g, type | 12FE4M5 | |
| COX ALOMAF | R 2012 IN | C | | | | | | |
| | | | | | | | | |
| ADDRESS (number ar | nd street) | 403 AVENIDA | CONSTI | TUCION | | | | |
| | | | | | | | | |
| Check if did than previous reported. (A | usly | SAN JUAN | | | 00906 | | | |
| 2. FEC IDENTIFIC | CATION NU | MBER ▼ | | CITY | | | STATE | ZIP CODE A STATE ▼ DISTRICT |
| C C005062 | 12 | | | S THIS REPORT | NEW (N) | OR | X AMEND (A) | |
| 4. TYPE OF RE (a) Quarterly R April 15 | | · | (b) 12 | 2-Day PRE - | Election Repo Primary (12P) Convention (1 | | General (* Special (1 | |
| | Quarterly Re | port (Q2) / Report (Q3) | E | Election on | M M / | D D / | Y " Y " Y " Y | in the State of |
| January | / 31 Year-End | Report (YE) | (c) 30 | 0-Day POS | r -Election Rep | ort for the | : | |
| | | | | × | General (30G |) | Runoff (30 | OR) Special (30S) |
| Termina | ition Report (| TER) | E | Election on | M M / | 06 | y y y y y 2012 | in the PR State of |
| 5. Covering Period | M N | 18 | | Y Y 112 | through | M N | 26 | Y Y Y Y Y 2012 |
| I certify that I have e | examined this | Report and to | the bes | st of my kn | owledge and l | belief it is t | rue, correct and | d complete. |
| Type or Print Name | of Treasurer | Javier J Lamb | oy Herna | andez | | | | |
| Signature of Treasure | er <i>Javier</i> | J Lamboy Hernan | dez | | [Electronically I | Filed] | Date 02 | 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| NOTE: Submission of | false, erroned | ous, or incomple | te inforn | nation may s | subject the per | son signing | this Report to t | he penalties of 2 U.S.C. §437g. |
| Office Use Only | | | | | | | | FEC FORM 3 (Revised 02/2003) |

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name COX ALOMAR 2012 INC

Report Covering the Period: From: 10 18 2012 To: 11 26 26 2012

| | | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|----|--|-------------------------|---------------------------------|
| i. | Net Contributions (other than loans) | | |
| | (a) Total Contributions (other than loans) (from Line 11(e)) | 88748.52 | 773133.36 |
| | (b) Total Contribution Refunds (from Line 20(d)) | 3671.45 | 3671.45 |
| | (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) | 85077.07 | 769461.91 |
| | Net Operating Expenditures | | |
| | (a) Total Operating Expenditures (from Line 17) | 151026.70 | 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)) | 151026.70 | 747489.83 |
| | Cash on Hand at Close of Reporting Period (from Line 27) | 14014.66 | |
| - | Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 100.01 | |
| Ο. | Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 85812.13 | |

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

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- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name COX ALOMAR 2012 INC 2012 26 2012 Report Covering the Period: From: 10 18 To: 11 I. RECEIPTS **COLUMN A COLUMN B COLUMN C Total this Period Election Cycle Total as of** Total for 06 2012 07 (date after general election) (date of general election) through 11. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other than 26 2012 Political Committees (last day of reporting period) Itemized (use Schedule A) 68225.22 510028.83 1050.00 Unitemized 19523.30 258604.53 214.30 (iii) Total of contributions from individuals 87748.52 768633.36 1264.30 Political Party Committees 0.00 0.00 0.00 Other Political Committees 1000.00 0.00 4500.00

Report of Receipts and Disbursements

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FEC Form 3 (Revised 1/01)

| | COLUMN A Total this Period | COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date) | Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates) | | | |
|-----|--|--|---|--|--|--|
| | (d) The Candidate | | | | | |
| | 0.00 | 0.00 | 0.00 | | | |
| | (e) TOTAL CONTRIBUTIONS (other than lo | pans) (add Lines 11(a)(iii), (b), (c) and (d)) | | | | |
| | 88748.52 | 773133.36 | 1264.30 | | | |
| 12. | TRANSFERS FROM OTHER AUTHORIZED | COMMITTEES | | | | |
| | 0.00 | 0.00 | 0.00 | | | |
| 13. | LOANS: (a) Made or Guaranteed by the Candidate | | | | | |
| | 0.00 | 0.00 | 0.00 | | | |
| | (b) All Other Loans | | | | | |
| | 0.00 | 0.00 | 0.00 | | | |
| | (c) TOTAL LOANS (add Lines 13(a) and (b) |) | | | | |
| | 0.00 | 0.00 | 0.00 | | | |
| 14. | OFFSETS TO OPERATING EXPENDITURE | S (Refunds, rebates, etc.) | | | | |
| | 0.00 | 0.00 | 0.00 | | | |
| 15. | OTHER RECEIPTS (Dividends, Interest, etc. |) | | | | |
| | 656.13 | 2356.13 | 400.00 | | | |
| 16. | TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 | and 15) | | | | |
| | 89404.65 | 775489.49 | 1664.30 | | | |
| | | | | | | |

Report of Receipts and Disbursements PAGE 5 / 133 FEC Form 3 (Revised 1/01) Write or Type Committee Name COX ALOMAR 2012 INC Report Covering the Period: To: From:

| | II. DISBURSEMENTS | | |
|-----|---|--|---|
| | COLUMN A Total this Period | COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date) | COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates) |
| 17. | OPERATING EXPENDITURES | | |
| | 151026.70 | 747489.83 | 4456.32 |
| 18. | TRANSFERS TO OTHER AUTHORIZED CO | MMITTEES | |
| | 0.00 | 0.00 | 0.00 |
| 19. | LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the C | andidate | |
| | 0.00 | 0.00 | 0.00 |
| | (b) Of All Other Loans | | |
| | 0.00 | 0.00 | 0.00 |
| | (c) TOTAL LOAN REPAYMENTS (add Lines | s 19(a) and 19(b)) | |
| | 0.00 | 0.00 | 0.00 |
| 20. | REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political | Committees | |
| | 3671.45 | 3671.45 | 0.00 |
| | (b) Political Party Committees | | |
| | | | |

0.00

0.00

FE1AN044

0.00

Report of Receipts and Disbursements

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FEC Form 3 (Revised 1/01)

COLUMN A COLUMN B COLUMN C **Total this Period** Election Cycle Total as of * Total for * (date after general election) (date of general election) through * (last day of reporting period) (* See page 5 for date) (* See page 5 for dates) Other Political Committees (such as PACs) 0.00 0.00 0.00 TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c)) 3671.45 3671.45 0.00 21. OTHER DISBURSEMENTS 675.64 7521.53 0.00 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21) 758682.81 4456.32 155373.79 III. NET CONTRIBUTIONS (OTHER THAN LOANS) (Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e)) 85077.07 769461.91 1264.30 IV. NET OPERATING EXPENDITURES (Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17) 747489.83 151026.70 4456.32 V. CASH SUMMARY 79983.80 CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... 24. TOTAL RECIEPTS THIS PERIOD (from Line 16)..... 89404.65 169388.45 25. SUBTOTAL (add Line 23 and Line 24)..... 155373.79 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25) 14014.66

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

| FOR LINE NUMBER: | | | PAGE | 7 | OF | 133 | |
|------------------|--------|-----|------|-----|----|---------|----|
| (check | only o | ne) | | | | | |
| X 11 | a | 11b | | 11c | 11 | d | |
| 12 | | 13a | | 13b | 14 | . [| 15 |

| Ar or | ny information copied from such Reports and for commercial purposes, other than using the | Statements may not be sold or used by any pene name and address of any political committee | erson for the purpose of soliciting contributions to solicit contributions from such committee. | | | |
|----------|---|--|---|--|--|--|
| | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | | | | |
| _ | Full Name (Last, First, Middle Initial) Luis A | | Date of Receipt | | | |
| A. | Mailing Address 842 Borth St. 26 | Date of Receipt 11 05 2012 | | | | |
| | City Philadelphia | State Zip Code PA 19130 | Transaction ID : SA11AI.10686 | | | |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period | | | |
| | Name of Employer | Occupation | 300.00 Via ACH | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | | | | |
| В. | Full Name (Last, First, Middle Initial) Ada M. Albors Hernandez | | Date of Receipt | | | |
| | Mailing Address P.O. Box 1842 | 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | |
| | City Mayaguez | State Zip Code PR 00681-1842 | Transaction ID : SA11AI.10307 | | | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | |
| | Name of Employer | Occupation | 1900.00 | | | |
| | Unemployed Receipt For: 2012 Primary General Other (specify) | Housewife Election Cycle-to-Date 2700.00 | | | | |
| _ | Full Name (Last, First, Middle Initial) Noemi Alomar | | Date of Receipt | | | |
| C. | Mailing Address El Remanso Arroyo St. A-5 | | 10 18 2012 | | | |
| | City San Juan | State Zip Code PR 00926 | Transaction ID : SA11AI.10477 | | | |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period | | | |
| | Name of Employer Retired | Occupation Nurse | 125.00 | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | | | | |
| Г | SUBTOTAL of Receipts This Page (optional) | | 2325.00 | | | |
| [T | OTAL This Period (last page this line number | only) | | | | |

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: 97 'A = G7 9 @ 65 B9 CI G'H9 LH F9 @ 5 H98 'HC' 5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N 5 H + C B

Form/Schedule: SA11AI

Transaction ID : SA11AI.10686

When receiving a contribution, Fundraising Coordinators must provide Form-003 to the contributor. Form establishes that this candidacy is a federal campaign subject to compliance with the FECA and regulations of the FEC and the law requires us to register the personal information of our contributors. Form-003 requires: Name, Mailing Address, Phone Number, ID Number, if the person is US citizen or legal resident (Gren Card), occupation, employer, if self-employed, the name of the company, date and email. The staffer must revise the forms and complete a report for compliance staff within 24 hours after the contribution. Compliance staff must revise the report and return it to the Fundraising Coordinator with the findings on 24 hours. The fundraising staffer must correct the report by contacting the contributor by email, phone or mail asking for the missing information on 24 hours. If staffer is unable to contact the contributor, must contact the fundraising organizer and ask for other contact info of the contributor. The fundraising coordinator must make a second effort to contact the contributor by email, phone or mail and report the information within 7 days. Compliance division and fundraising division must have follow-up sessions weekly to review the missing information status. Cox Alomar 2012, Inc. continues the efforts to complete the contributor's missing information.

Form/Schedule: Transaction ID:

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

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| (check only one) | | | | | | | | | |
| X | 11a | | 11b | | 11c | | 11 | d | _ |
| | 12 | | 13a | | 13b | | 14 | | 15 |

| | | Statements may not be sold or used by any pere name and address of any political committee | | | | |
|----------|--|--|------------------------------------|--|--|--|
| | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) Noemi Alomar | Date of Receipt | | | | |
| A. | Mailing Address El Remanso | Date of Receipt | | | | |
| | Arroyo St. A-5 | | 10 31 2012 | | | |
| | City | State Zip Code PR 00926 | Transaction ID : SA11AI.10301 | | | |
| | San Juan | PR 00926 | | | | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | |
| | Name of Employer Retired | Occupation Nurse | 1000.00 | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | | | | |
| В. | Full Name (Last, First, Middle Initial) Rafael Alomar Colon | | Date of Receipt | | | |
| | Mailing Address Cond. Vista Verde Apt. 601 San Ignacio Ave. | 10 19 2012 | | | | |
| | City San Juan | State Zip Code PR 00921 | Transaction ID : SA11AI.10481 | | | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | |
| | Name of Employer | Occupation | 250.00 | | | |
| | self employed | electrician | | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 460.00 | | | | |
| _ | Full Name (Last, First, Middle Initial) Anita Vda Aponte Perez | | Date of Receipt | | | |
| C. | Mailing Address 100 Marginal St. #336 Cond. Granada Park | | 10 19 2012 | | | |
| | City Guaynabo | State Zip Code PR 00969 | Transaction ID : SA11AI.10494 | | | |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period | | | |
| | Name of Employer | Occupation | 250.00 | | | |
| | Unemployed | Retired | , | | | |
| | Receipt For: 2012 | Election Cycle-to-Date | | | | |
| | Primary General Other (specify) | 250.00 | | | | |
| Г | SUBTOTAL of Receipts This Page (optional) | | 1500.00 | | | |

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for each category of the ITEMIZED RECEIPTS Detailed Summary Page 13a 13b 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) COX ALOMAR 2012 INC Full Name (Last, First, Middle Initial) Marjorie Avila Torres Date of Receipt Mailing Address Cond. Imaculada Plaza I Apt. 904 10 2012 24 1717 Ponc de Leon Ave City State Zip Code Transaction ID: SA11AI.10588 PR 00909-1937 San Juan FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 200.00 Name of Employer Occupation self employed Attorney Receipt For: 2012 Election Cycle-to-Date Primary X General 425.00 Other (specify) Full Name (Last, First, Middle Initial) Gory Ballester Ortiz Date of Receipt Mailing Address PO Box 435 10 18 2012 City State Zip Code Transaction ID: SA11AI.10460 Adjuntas PR 00601 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Radioogist Self-Employed Receipt For: 2012 Election Cycle-to-Date X General Primary 315.00 Other (specify) Full Name (Last, First, Middle Initial) Gory Ballester Ortiz Date of Receipt Mailing Address PO Box 435 2012 24 City State Zip Code Transaction ID: SA11AI.10587 PR Adjuntas 00601 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation Self-Employed Radioogist Receipt For: 2012 Election Cycle-to-Date | General Primary 415.00 Other (specify) 550.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 11 OF (check only one) 11a 11b 11d 11c 12 13a 13b 14

133 Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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) Gerardina Bermudez Date of Receipt Mailing Address PO Box 434 10 2012 30 City State Zip Code Transaction ID: SA11AI.10535 PR 00726 Caguas FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation Unemployed Retired Receipt For: 2012 Election Cycle-to-Date Primary X General 450.00 Other (specify) Full Name (Last, First, Middle Initial) Carmen Bermudez Perez Date of Receipt Mailing Address PO Box 130 31 2012 City State Zip Code Transaction ID: SA11AI.10359 Bayamon PR 00960 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Retired Retired Receipt For: 2012 Election Cycle-to-Date Primary Meneral Control 900.00 Other (specify) Full Name (Last, First, Middle Initial) Ivan Berrios Rivera Date of Receipt Mailing Address HC 2 Box 5242 2012 24 City State Zip Code Transaction ID: SA11AI.10541 PR 00782 Comerio FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Self-Employed Retailer Receipt For: 2012 Election Cycle-to-Date General Primary 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional).....

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

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

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|------------------|---|-----|--|-----|------|--------|----|-----|----|
| (check only one) | | | | | | | | | |
| | × | 11a | | 11b | | 11c | 11 | d | |
| | | 12 | | 13a | | 13b | 14 | | 15 |

| | | Statements may not be sold or used by any pe e name and address of any political committee | | | | |
|----------|---|--|---|--|--|--|
| | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) Carmelo Burgos Gutierrez | | Date of Receipt | | | |
| Λ. | Mailing Address PO Box 561 | 10 18 2012 | | | | |
| | City Punta Santiago | State Zip Code PR 00741 | Transaction ID : SA11AI.10466 | | | |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period | | | |
| | Name of Employer Self-Employed | Occupation Constructor | 125.00 | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 325.00 | | | | |
| В. | Full Name (Last, First, Middle Initial) Mayra Busquets | | Date of Receipt | | | |
| ٠. | Mailing Address 309 Sargento Oredino St. Las Americas Court #16 | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | |
| | City Hato Rey | State Zip Code PR 00918 | Transaction ID : SA11AI.10498 | | | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | |
| | Name of Employer | Occupation | 250.00 | | | |
| | Public Servant Receipt For: 2012 Primary General Other (specify) | Commonwealth of Puerto Rico Election Cycle-to-Date 250.00 | | | | |
| _ | Full Name (Last, First, Middle Initial) Jose Raul Cancio Bigas | | Date of Receipt | | | |
| C. | Mailing Address Urb. Milaville Garcia 36 D St. | | 10 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | |
| | City San Juan | State Zip Code PR 00926 | Transaction ID : SA11AI.10329 | | | |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period | | | |
| | Name of Employer Self-Employed | Occupation Attorney | 400.00 | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 400.00 | | | | |
| s | SUBTOTAL of Receipts This Page (optional) | | 775.00 | | | |
| Т | OTAL This Period (last page this line number | only) | , , | | | |

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Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 13a 13b 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) COX ALOMAR 2012 INC Full Name (Last, First, Middle Initial) Jose Raul Cancio Bigas Date of Receipt Mailing Address Urb. Milaville Garcia 10 2012 23 36 D St. City State Zip Code Transaction ID: SA11AI.10331 PR 00926 San Juan FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 400.00 Name of Employer Occupation Self-Employed Attorney Receipt For: 2012 Election Cycle-to-Date X General Primary 800.00 Other (specify) Full Name (Last, First, Middle Initial) Olga R. Cardona Hernandez Date of Receipt Mailing Address Cond. Plaza del Mar 10 31 2012 3001 Isla Verde Ave. PH 2401 City State Zip Code Transaction ID: SA11AI.10556 Carolina PR 00979-4958 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Retired Retired Receipt For: 2012 Election Cycle-to-Date Primary Meneral Control 1200.00 Other (specify) Full Name (Last, First, Middle Initial) Osvaldo Carlo Linares Date of Receipt Mailing Address American Airlines Building PH 2012 22 City Zip Code State Transaction ID: SA11AI.9870 PR San Juan 00911 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2500.00 Name of Employer Occupation Self-Employed Attorney Receipt For: 2012 Election Cycle-to-Date Primary General 2500.00 Other (specify) 3400.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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|------------------|-----|--|-----|------|--------|----|---------|----|
| (check only one) | | | | | | | | |
| X | 11a | | 11b | | 11c | 11 | d | |
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| | nd Statements may not be sold or used by any pe the name and address of any political committee | |
|--|--|------------------------------------|
| NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | |
| Full Name (Last, First, Middle Initial) Aurora M. Casablanca Mailing Address Urb. Quintas del Rio | | Date of Receipt |
| El Plaza 3 | | 10 18 2012 |
| City | State Zip Code | Transaction ID : SA11AI.10432 |
| Bayamon | PR 00961 | _ |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period |
| Name of Employer | Occupation | 125.00 |
| Servicios de TV Paga | Executive | |
| Receipt For: 2012 Primary X General Other (specify) | Election Cycle-to-Date 375.00 | |
| Full Name (Last, First, Middle Initial) Miguel A. Casellas Lopez Mailing Address Do Do Mailing Address | | Date of Receipt |
| Mailing Address PO Box 11884 | | 10 18 2012 |
| City | State Zip Code | |
| San Juan | PR 00922-1884 | Transaction ID : SA11AI.10454 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period |
| Name of Employer | Occupation | 125.00 |
| AON | Vice-President | |
| Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 425.00 | |
| Full Name (Last, First, Middle Initial) Angel Castillo | | Date of Receipt |
| Mailing Address Encantada MB108 Parque del Monte | | 10 24 2012 |
| City Trujillo Alto | State Zip Code PR 00976 | Transaction ID : SA11AI.10596 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period |
| Name of Employer | Occupation | 125.00 |
| Receipt For: 2012 Primary X General Other (specify) | Election Cycle-to-Date | |
| SUBTOTAL of Receipts This Page (optional) | | 375.00 |
| TOTAL This Period (last page this line numb | per only) | |

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: 97 'A = G7 9 @ 65 B9 CI G'H9 LH'F9 @ 5 H98 'HC' 5 'F9 DC FHŽ G7 < 98 I @ 9 'C F' ± H9 A ± N5 H± C B

Form/Schedule: SA11AI

Transaction ID : SA11AI.10596

When receiving a contribution, Fundraising Coordinators must provide Form-003 to the contributor. Form establishes that this candidacy is a federal campaign subject to compliance with the FECA and regulations of the FEC and the law requires us to register the personal information of our contributors. Form-003 requires: Name, Mailing Address, Phone Number, ID Number, if the person is US citizen or legal resident (Gren Card), occupation, employer, if self-employed, the name of the company, date and email. The staffer must revise the forms and complete a report for compliance staff within 24 hours after the contribution. Compliance staff must revise the report and return it to the Fundraising Coordinator with the findings on 24 hours. The fundraising staffer must correct the report by contacting the contributor by email, phone or mail asking for the missing information on 24 hours. If staffer is unable to contact the contributor, must contact the fundraising organizer and ask for other contact info of the contributor. The fundraising coordinator must make a second effort to contact the contributor by email, phone or mail and report the information within 7 days. Compliance division and fundraising division must have follow-up sessions weekly to review the missing information status. Cox Alomar 2012, Inc. continues the efforts to complete the contributor's missing information.

Form/Schedule: Transaction ID:

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| 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 | | | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) Francisco Chevere Mourino Mailing Address P.O. Box 364225 | | Date of Receipt | | | | | | |
| | .O. Box 304223 | | 10 23 _ 2012 _ | | | | | | |
| | City San Juan | State Zip Code PR 00936 | Transaction ID : SA11AI.10366 | | | | | | |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period | | | | | | |
| | Name of Employer Mc Connell & Valdes | Occupation Attorney | In-kind - Fundraising Expenses-Meals | | | | | | |
| | Receipt For: 2012 Primary Seneral Other (specify) | Election Cycle-to-Date 642.16 | | | | | | | |
| В. | Full Name (Last, First, Middle Initial) Francisco Chevere Mourino Mailing Address P.O. Box 364225 | Date of Receipt | | | | | | | |
| | City | State Zip Code | 10 31 2012 | | | | | | |
| | San Juan | PR 00936 | Transaction ID : SA11AI.10292 | | | | | | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | | | | |
| | Name of Employer | Occupation | 1750.00 | | | | | | |
| | Mc Connell & Valdes | Attorney | | | | | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | | | | | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) Sergio L. Chevere Mourino | | Date of Receipt | | | | | | |
| ٥. | Mailing Address Urb. El Monte 3166 Marbella St. | Chata Zin Cada | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | | | |
| | City Ponce | State Zip Code PR 00716-4808 | Transaction ID : SA11AI.10446 | | | | | | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | | | | |
| | Name of Employer Primary Medical Group | Occupation Physician | 500.00 | | | | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | | | | | | | |
| Г | UBTOTAL of Receipts This Page (optional) | | 2467.16 | | | | | | |
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133 FOR LINE NUMBER: **PAGE** 17 OF Use separate schedule(s) (check only one) for each category of the 11a 11b 11d 11c Detailed Summary Page 12 13a 13b 14

ITEMIZED RECEIPTS 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) Sergio L. Chevere Mourino Date of Receipt Mailing Address Urb. El Monte 10 2012 23 3166 Marbella St. City State Zip Code Transaction ID: SA11AI.9917 PR 00716-4808 Ponce FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 2500.00 Name of Employer Occupation Primary Medical Group Physician Receipt For: 2012 Election Cycle-to-Date Primary X General 4250.00 Other (specify) Full Name (Last, First, Middle Initial) Teresita Cintron Date of Receipt Mailing Address Condado Ave. #69 18 2012 Citv State Zip Code Transaction ID: SA11AI.10482 San Juan PR 00907 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 125.00 Name of Employer Occupation Realtor Self-Employed Receipt For: 2012 Election Cycle-to-Date Meneral Control Primary 225.00 Other (specify) Full Name (Last, First, Middle Initial) Axel Colon Perez Date of Receipt Mailing Address PO Box 1093 2012 18 City State Zip Code Transaction ID: SA11AI.10439 PR 00705 Aibonito FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Human Resources Specialist Autoridad de Carreteras Receipt For: 2012 Election Cycle-to-Date X General Primary 430.00 Other (specify) 2875.00 SUBTOTAL of Receipts This Page (optional).....

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

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

| | | e name and address of any political committee | | | | | |
|----------|---|---|---|--|--|--|--|
| | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | | | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) Manuel Colon Rivera | | Date of Receipt | | | | |
| Λ. | Mailing Address PO Box 195183 | | 10 18 2012 | | | | |
| | City | State Zip Code | Transaction ID : SA11AI.10435 | | | | |
| | San Juan | PR 00918 | - | | | | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | | |
| | Name of Employer Self-Employed | Occupation Retailer | 125.00 | | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | | | | | |
| В. | Full Name (Last, First, Middle Initial) Manuel Colon Rivera | Date of Receipt | | | | | |
| υ. | Mailing Address PO Box 195183 | | 10 27 2012 | | | | |
| | City San Juan | State Zip Code PR 00918 | Transaction ID : SA11AI.10633 | | | | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | | |
| | Name of Employer | Occupation | 100.00 | | | | |
| | Self-Employed | Retailer | | | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 925.00 | | | | | |
| _ | Full Name (Last, First, Middle Initial) Javier Cortes Gonzalez | | Date of Receipt | | | | |
| C. | Mailing Address 2 Dorado BCH. E | | 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | |
| | City Dorado | State Zip Code PA 00646 | Transaction ID : SA11AI.10319 | | | | |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period | | | | |
| | Name of Employer Self-Employed | Occupation Engineer | 250.00 | | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 250.00 | | | | | |
| Г | SUBTOTAL of Receipts This Page (optional) | | 475.00 | | | | |
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FOR LINE NUMBER: **PAGE** 19 OF (check only one) 11a 11b 11d 11c Detailed Summary Page 12 13a 13b 14

133 Use separate schedule(s) for each category of the ITEMIZED RECEIPTS 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) Ina Cortes Rios Date of Receipt Mailing Address PO Box 9009 2012 05 City State Zip Code Transaction ID: SA11AI.10313 PR 00732 Ponce FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 2000.00 Name of Employer Occupation Unemplyed Homemaker Receipt For: 2012 Election Cycle-to-Date X General Primary 2000.00 Other (specify) Full Name (Last, First, Middle Initial) Maria L. Cox Alomar Date of Receipt Mailing Address PMB 356 10 30 2012 138 Winston Churchill Ave. City State Zip Code Transaction ID: SA11AI.10285 San Juan PR 00926-6013 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1600.00 Name of Employer Occupation Homemaker Unemployed Receipt For: 2012 Election Cycle-to-Date Primary Meneral Control 2425.00 Other (specify) Full Name (Last, First, Middle Initial) Rafael A. Cox Rosario Date of Receipt Mailing Address P.O. Box 366676 2012 22 City State Zip Code Transaction ID: SA11AI.10551 PR San Juan 00936-6676 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 200.00 Name of Employer Occupation U.P.R School of Medicine Physician Receipt For: 2012 Election Cycle-to-Date General Primary 4836.00 Other (specify) 3800.00 SUBTOTAL of Receipts This Page (optional).....

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

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| Ar or | 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 | | | | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) Carlos Crespo Claudio Mailing Address Urb. Altos de la Fuente C2 6th. St. City | State Zip Code PR 00725 | Date of Receipt 10 22 2012 Transaction ID : SA11AI.10351 | | | | | | | |
| | Caguas FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2012 Primary General Other (specify) | Occupation Election Cycle-to-Date | Amount of Each Receipt this Period | | | | | | | |
| В. | Full Name (Last, First, Middle Initial) Carlos Crespo Claudio Mailing Address Urb. Altos de la Fuente C2 6th. St. | State Zip Code PR 00725 | Date of Receipt 10 22 2012 Transaction ID : SA11AI.10627 | | | | | | | |
| _ | Caguas FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2012 Primary General Other (specify) | Occupation Election Cycle-to-Date | Amount of Each Receipt this Period 200.00 | | | | | | | |
| C. | Full Name (Last, First, Middle Initial) Ivette Cruz Pagan Mailing Address PO Box 6798 City | State Zip Code | Date of Receipt M | | | | | | | |
| | San Juan FEC ID number of contributing federal political committee. Name of Employer Academia de Psiquiatria de PR Receipt For: 2012 Primary X General Other (specify) | PR 00914 C Occupation Physician Election Cycle-to-Date 500.00 | Amount of Each Receipt this Period | | | | | | | |
| Г | SUBTOTAL of Receipts This Page (optional) | | 1100.00 | | | | | | | |

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Form/Schedule: SA11AI

Transaction ID : SA11AI.10351

When receiving a contribution, Fundraising Coordinators must provide Form-003 to the contributor. Form establishes that this candidacy is a federal campaign subject to compliance with the FECA and regulations of the FEC and the law requires us to register the personal information of our contributors. Form-003 requires: Name, Mailing Address, Phone Number, ID Number, if the person is US citizen or legal resident (Gren Card), occupation, employer, if self-employed, the name of the company, date and email. The staffer must revise the forms and complete a report for compliance staff within 24 hours after the contribution. Compliance staff must revise the report and return it to the Fundraising Coordinator with the findings on 24 hours. The fundraising staffer must correct the report by contacting the contributor by email, phone or mail asking for the missing information on 24 hours. If staffer is unable to contact the contributor, must contact the fundraising organizer and ask for other contact info of the contributor. The fundraising coordinator must make a second effort to contact the contributor by email, phone or mail and report the information within 7 days. Compliance division and fundraising division must have follow-up sessions weekly to review the missing information status. Cox Alomar 2012, Inc. continues the efforts to complete the contributor's missing information.

Form/Schedule: Transaction ID:

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

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| | | Statements may not be sold or used by any pele name and address of any political committee | |
|----------|---|---|---|
| | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | |
| Α. | Full Name (Last, First, Middle Initial) Apolinar De los Santos Matas Mailing Address Santa Juanita Avenue | | Date of Receipt |
| | Esq. Alfa St. #52 | | 10 18 2012 |
| | City | State Zip Code | Transaction ID : SA11AI.10462 |
| | Bayamon | PR 00952 | Transaction id : SATTAL 10402 |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period |
| | Name of Employer | Occupation | 250.00 |
| | self-employed | Retailer | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 500.00 | |
| В. | Full Name (Last, First, Middle Initial) Iraida Del Rio Rodriguez | | Date of Receipt |
| | Mailing Address El Monte 3166 3166 Marbella St. | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | |
| | City Ponce | State Zip Code PR 00716 | Transaction ID : SA11AI.9911 |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period |
| | Name of Employer | Occupation | 2500.00 |
| | Primary Medical Group | Doctor | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 2500.00 | |
| <u> </u> | Full Name (Last, First, Middle Initial) Teresa Denton | | Date of Receipt |
| U. | Mailing Address Marbella 61 | | 10 24 2012 |
| | City | State Zip Code | Transaction ID : SA11AI.9922 |
| | San Juan | PR 00911 | |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period |
| | Name of Employer | Occupation | 2000.00 |
| | unemployed | Retired | , |
| | Receipt For: 2012 | Election Cycle-to-Date | |
| | Primary General Other (specify) | 2500.00 | |
| Г | SUBTOTAL of Receipts This Page (optional) | | 4750.00 |

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

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| | | Statements may not be sold or used by any per e name and address of any political committee | | | | |
|----|---|--|---|--|--|--|
| | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | | | | |
| | Full Name (Last, First, Middle Initial) Juan R. Diaz Troche | | | | | |
| Α. | Mailing Address Road 351 # 3230 | | Date of Receipt | | | |
| | City | State Zip Code | 10 24 2012 | | | |
| | Mayaguez | PR 00682 | Transaction ID : SA11AI.9919 | | | |
| - | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | |
| | Name of Employer self employed | Occupation Surgeon | 1000.00 | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 3900.00 | | | | |
| В. | Full Name (Last, First, Middle Initial) Paolo Di Rosa | | Date of Receipt | | | |
| | Mailing Address 3257 Worthington St. NW | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | |
| | City Washington | State Zip Code DC 20015 | Transaction ID : SA11AI.10546 | | | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | |
| | Name of Employer | Occupation | 500.00 | | | |
| | Arnold & Porter | Partner | | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 500.00 | | | | |
| | Full Name (Last, First, Middle Initial) John Fehrenbach | | Date of Receipt | | | |
| C. | Mailing Address 2809 Valley Dr. | | 10 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | |
| | City Alexandria | State Zip Code VA 22302 | Transaction ID : SA11AI.10518 | | | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | |
| İ | Name of Employer | Occupation | 250.00 | | | |
| | Winston Strawn | Attorney | | | | |
| | Receipt For: 2012 | Election Cycle-to-Date | | | | |
| | Primary X General Other (specify) | 750.00 | | | | |
| | JBTOTAL of Receipts This Page (optional) | | 1750.00 | | | |

133 FOR LINE NUMBER: **PAGE** 24 OF Use separate schedule(s) (check only one) for each category of the 11a 11b 11d 11c Detailed Summary Page 12 13a 13b 14

ITEMIZED RECEIPTS 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) Maureen Frazier Date of Receipt Mailing Address 224 Euclid Ave. 10 2012 19 City State Zip Code Transaction ID: SA11AI.10527 NY 12208 Albany FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 300.00 Name of Employer Occupation Receipt For: 2012 Election Cycle-to-Date Primary X General 300.00 Other (specify) Full Name (Last, First, Middle Initial) Luisa Virginia Fuster Berlingeri Date of Receipt Mailing Address Cond. Villa Caparra Tower PH 1 10 18 2012 A St. # 44 City State Zip Code Transaction ID: SA11AI.10463 Guaynabo PR 00966-2235 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Self-Employed Attorney Receipt For: 2012 Election Cycle-to-Date Primary Meneral Control 400.00 Other (specify) Full Name (Last, First, Middle Initial) Juan Garcia Castro Date of Receipt Mailing Address Urb. Sans Souci 2012 30 K-9 Calle 1 City State Zip Code Transaction ID: SA11AI.10339 PR Bayamon 00956 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Self-Employed Medical Doctor Receipt For: 2012 Election Cycle-to-Date General Primary 500.00 Other (specify) 1050.00 SUBTOTAL of Receipts This Page (optional).....

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

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Form/Schedule: SA11AI

Transaction ID : SA11AI.10527

When receiving a contribution, Fundraising Coordinators must provide Form-003 to the contributor. Form establishes that this candidacy is a federal campaign subject to compliance with the FECA and regulations of the FEC and the law requires us to register the personal information of our contributors. Form-003 requires: Name, Mailing Address, Phone Number, ID Number, if the person is US citizen or legal resident (Gren Card), occupation, employer, if self-employed, the name of the company, date and email. The staffer must revise the forms and complete a report for compliance staff within 24 hours after the contribution. Compliance staff must revise the report and return it to the Fundraising Coordinator with the findings on 24 hours. The fundraising staffer must correct the report by contacting the contributor by email, phone or mail asking for the missing information on 24 hours. If staffer is unable to contact the contributor, must contact the fundraising organizer and ask for other contact info of the contributor. The fundraising coordinator must make a second effort to contact the contributor by email, phone or mail and report the information within 7 days. Compliance division and fundraising division must have follow-up sessions weekly to review the missing information status. Cox Alomar 2012, Inc. continues the efforts to complete the contributor's missing information.

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

| | | te name and address of any political committee | | | | | |
|----------|--|--|---|--|--|--|--|
| | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) Juan Garcia Castro | | Date of Receipt | | | | |
| | Mailing Address Urb. Sans Souci K-9 Calle 1 | | 10 30 Y Y Y Y Y Y | | | | |
| | City | State Zip Code | Transaction ID : SA11AI.10811 | | | | |
| | Bayamon | PR 00956 | | | | | |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 500.00 | | | | |
| | Name of Employer Self-Employed | Occupation Medical Doctor | 300.00 | | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | | | | | |
| В. | Full Name (Last, First, Middle Initial) Augusto Gautier | Date of Receipt | | | | | |
| υ. | Mailing Address PO Box 11591 | | 10 27 2012 | | | | |
| | City San Juan | State Zip Code PR 00910-2691 | Transaction ID : SA11AI.10644 | | | | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | | |
| | Name of Employer | Occupation | 100.00 | | | | |
| | self employed | Architect | | | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 500.00 | | | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) Carlos E. Girod Morales | | Date of Receipt | | | | |
| C. | Mailing Address PO Box 13617 | | 10 18 2012 | | | | |
| | City San Juan | State Zip Code PR 00908 | Transaction ID : SA11AI.10455 | | | | |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period | | | | |
| | Name of Employer self employed | Occupation Physician | 500.00 | | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | | | | | |
| Г | SUBTOTAL of Receipts This Page (optional) | | 1100.00 | | | | |
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| | | Statements may not be sold or used by any pe e name and address of any political committee | |
|----------|--|---|------------------------------------|
| | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | |
| Α. | Full Name (Last, First, Middle Initial) Martin Gonzalez Luna Mailing Address Urb. Panorama | Date of Receipt | |
| | A2 Calle 2 | 10 23 2012 | |
| | City | State Zip Code | Transaction ID : SA11AI.10526 |
| | Bayamon | PR 00957-4379 | Transaction in . SATTAL 10320 |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period |
| | Name of Employer unemployed | Occupation Retired | 100.00 |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 464.00 | |
| В. | Full Name (Last, First, Middle Initial) Hector Goveo Ortiz | | Date of Receipt |
| | Mailing Address Box 1315 | 10 27 2012 | |
| | City Bayamon | State Zip Code PR 00960 | Transaction ID : SA11AI.10673 |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period |
| | Name of Employer | Occupation | 100.00 |
| | Self-Employed | Certified Public Accountant | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 500.00 | |
| <u> </u> | Full Name (Last, First, Middle Initial) Damian Grovas Abad | | Date of Receipt |
| C. | Mailing Address Senderos de Montehiedra 27 6th St. | | 10 30 2012 |
| | City San Juan | State Zip Code PR 00926 | Transaction ID : SA11AI.10283 |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period |
| | Name of Employer Medical Center of Puerto Rico | Occupation Medical Doctor | 2300.00 |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 2500.00 | |
| s | SUBTOTAL of Receipts This Page (optional) | | 2500.00 |
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Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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) Ivan Hernandez Lopez Date of Receipt Mailing Address Urb. Golden Gate 10 2012 18 43 Esmeralda St. City State Zip Code Transaction ID: SA11AI.10552 PR 00968 Guaynabo FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation Ivan A. Hernandez & Associates Architect Receipt For: 2012 Election Cycle-to-Date Primary X General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Peter N. Hiebert Date of Receipt Mailing Address 3207 Rolling Rd PH 301 10 31 2012 City State Zip Code Transaction ID: SA11AI.10299 Chevy Chase MD 20815-4035 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Winston Strawn Attorney Receipt For: 2012 Election Cycle-to-Date Meneral Control Primary 2000.00 Other (specify) Full Name (Last, First, Middle Initial) Javier Inclan Aponte Date of Receipt Mailing Address Calle 5 J9 2012 03 Parque de San Ignacio City Zip Code State Transaction ID: SA11AI.10785 PR San Juan 00921 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Self-Employed Attorney Receipt For: 2012 Election Cycle-to-Date | General Primary 250.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

133 FOR LINE NUMBER: **PAGE** 29 OF Use separate schedule(s) (check only one) for each category of the 11a 11b 11d 11c Detailed Summary Page 12 13a 13b 14

ITEMIZED RECEIPTS 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) Luis Raul Irizarry Cuebas Date of Receipt Mailing Address Recinto Sur St. esq. Tanca St. 10 2012 18 City State Zip Code Transaction ID: SA11AI.10470 PR 00901 San Juan FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 125.00 Name of Employer Occupation self employed Attorney Receipt For: 2012 Election Cycle-to-Date Primary X General 525.00 Other (specify) Full Name (Last, First, Middle Initial) Lawrence Kiern Date of Receipt Mailing Address 1477 Evans Farm Drive 10 30 2012 Citv State Zip Code Transaction ID: SA11AI.10509 Mc Lean VA 22101-5655 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Winston and Strawn Attorney Receipt For: 2012 Election Cycle-to-Date Primary ✓ General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Alicia Lamboy Mombille Date of Receipt Mailing Address 801 Guatemala St. 2012 18 Urb. Las Americas City Zip Code State Transaction ID: SA11AI.10503 PR San Juan 00921 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Goldman, Antonetti & Cordova Attorney Receipt For: 2012 Election Cycle-to-Date General Primary 250.00 Other (specify) 625.00 SUBTOTAL of Receipts This Page (optional).....

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

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ITEMIZED RECEIPTS 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) David Latoni Cabanillas Date of Receipt Mailing Address PO Box 1856 10 2012 20 City State Zip Code Transaction ID: SA11AI.10346 PR 00681 Mayaguez FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation Self-Employed Medical Doctor Receipt For: 2012 Election Cycle-to-Date X General Primary 1200.00 Other (specify) Full Name (Last, First, Middle Initial) Ana Lopez Date of Receipt Mailing Address PO Box 3146 10 22 2012 City State Zip Code Transaction ID: SA11AI.9904 Mayaguez PR 00681 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Homemaker Unemployed Receipt For: 2012 Election Cycle-to-Date Primary Meneral Control 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Michell Lugo Diaz Date of Receipt Mailing Address 600 Jesus T Pinero Ave. 2012 29 2403 Cond. parque de Loyola City Zip Code State Transaction ID: SA11AI.10536 PR San Juan 00918 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Self-Employed Attorney Receipt For: 2012 Election Cycle-to-Date General Primary 500.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

133 FOR LINE NUMBER: **PAGE** 31 OF Use separate schedule(s) (check only one) for each category of the 11a 11b 11d 11c Detailed Summary Page 12 13a 13b 14

ITEMIZED RECEIPTS 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) **Enrique Mangual** Date of Receipt Mailing Address Ave. Isla 3001 10 2012 31 PH 2401, Cond. Plaza del Mar City State Zip Code Transaction ID: SA11AI.10555 PR 00797 Carolina FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation Kikuet Owner Receipt For: 2012 Election Cycle-to-Date Primary X General 2200.00 Other (specify) Full Name (Last, First, Middle Initial) Edgardo Marquez Lizardi Date of Receipt Mailing Address Cond. Monte Sur Apt.939 10 28 2012 190 Ave Hostos Citv State Zip Code Transaction ID: SA11AI.10559 San Juan PR 00918-4628 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation Retired Unemployed Receipt For: 2012 Election Cycle-to-Date Primary Meneral Control 350.00 Other (specify) Full Name (Last, First, Middle Initial) Edgardo Marquez Lizardi Date of Receipt Mailing Address Cond. Monte Sur Apt.939 2012 28 190 Ave Hostos City Zip Code State Transaction ID: SA11AI.10564 PR San Juan 00918-4628 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 50.00 Name of Employer Occupation Unemployed Retired Receipt For: 2012 Election Cycle-to-Date X General Primary 400.00 Other (specify) 650.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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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 | | | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) Marcos Matta | Date of Receipt | | | | |
| ۸. | Mailing Address Urb. Brisasd del Mar J23 2nd St. | | 10 27 2012 | | | |
| | City | State Zip Code | Transaction ID : SA11AI.10622 | | | |
| | Luquillo | PR 00773 | - SATTAL 10022 | | | |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period | | | |
| | Name of Employer Self-Employed | Occupation Retailer | 200.00 | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 400.00 | | | | |
| В. | Full Name (Last, First, Middle Initial) Rafael Medina Rivera | Date of Receipt | | | | |
| ٠. | Mailing Address Carmen Hills Ballin Blvd. | | 10 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | |
| | City San Juan | State Zip Code PR 00926 | Transaction ID : SA11AI.10544 | | | |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period | | | |
| | Name of Employer | Occupation | 300.00 | | | |
| | Self-Employed | Medical Doctor | | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) Elliot Melecio | | Date of Receipt | | | |
| C. | Mailing Address Paseo Los Corales 633 Mar de Bearing | | 10 18 2012 | | | |
| | City Dorado | State Zip Code PR 00646 | Transaction ID : SA11AI.10767 | | | |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period | | | |
| | Name of Employer Self-Employed | Occupation Medical Doctor | 100.00 | | | |
| | Receipt For: 2012 Primary X General Other (specify) | Election Cycle-to-Date 850.00 | | | | |
| s | SUBTOTAL of Receipts This Page (optional) | | 600.00 | | | |
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| | | e name and address of any political committee | | |
|---------------|--|---|---|--|
| | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | | |
| <u></u> А. | Full Name (Last, First, Middle Initial) Maria Melendez | Date of Receipt | | |
| | Mailing Address Urb. Garcia | 10 18 2012 | | |
| | Calle D-36 | State Zip Code | | |
| | San Juan | PR 00926 | Transaction ID : SA11AI.10488 | |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 250.00 | |
| | Name of Employer Unemployed | Occupation Retired | 230.00 | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 325.00 | | |
| В. | Full Name (Last, First, Middle Initial) Maria Melendez | | Date of Receipt | |
| ٠. | Mailing Address Urb. Garcia Calle D-36 | 10 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | |
| | City San Juan | State Zip Code PR 00926 | Transaction ID : SA11AI.10625 | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | |
| | Name of Employer | Occupation | 200.00 | |
| | Unemployed | Retired | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 525.00 | | |
| <u> </u> | Full Name (Last, First, Middle Initial) Milagros Mendez | | Date of Receipt | |
| U. | Mailing Address PO Box 8659 | | 10 23 2012 | |
| | City San Juan | State Zip Code PR 00910 | Transaction ID : SA11AI.10353 | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | |
| | Name of Employer Self-Employed | Occupation Retailer | 600.00 | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 600.00 | | |
| Г | | | | |
| s | SUBTOTAL of Receipts This Page (optional) | | 1050.00 | |
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Use separate schedule(s) (check or for each category of the Detailed Summary Page

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| | 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 | | | | | | | |
| <u></u> А. | Full Name (Last, First, Middle Initial) Milagros Mendez | Date of Receipt | | | | | | |
| Λ. | Mailing Address PO Box 8659 | 10 31 2012 | | | | | | |
| | City San Juan | State Zip Code PR 00910 | Transaction ID : SA11AI.10356 | | | | | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | | | |
| | Name of Employer Self-Employed | Occupation Retailer | 300.00 | | | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | | | | | | |
| В. | Full Name (Last, First, Middle Initial) Jose L. Mendoza | Date of Receipt | | | | | | |
| | Mailing Address PO Box 190476 | M M / D D / Y Y Y Y Y Y 10 10 20 2012 | | | | | | |
| | City San Juan | State Zip Code PR 00919-0476 | Transaction ID : SA11AI.10406 | | | | | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | | | |
| | Name of Employer Jose Luis Mendoza & Co. | Occupation Certified Public Accountant | 100.00 | | | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 750.00 | | | | | | |
| _ | Full Name (Last, First, Middle Initial) Ferdinand Mercado Ramos | | Date of Receipt | | | | | |
| C. | Mailing Address Executive Tower, Suite 903 B 623 Ponce de Leon Ave. | 11 01 2012 | | | | | | |
| | City San Juan | State Zip Code PR 00918 | Transaction ID : SA11AI.10326 | | | | | |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period | | | | | |
| | Name of Employer Self-Employed | | | | | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 500.00 | | | | | | |
| s | SUBTOTAL of Receipts This Page (optional) | | 900.00 | | | | | |
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| | | Statements may not be sold or used by any pe e name and address of any political committee | |
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| | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | |
| | Full Name (Last, First, Middle Initial) Cesar Miranda | | |
| A. | Mailing Address PO Box 9022534 | Date of Receipt 10 22 2012 | |
| | City | State Zip Code | Transaction ID : SA11AI.9907 |
| | San Juan | PR 00902-2534 | . SATTAL 9907 |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period |
| | Name of Employer | Occupation | 1000.00 |
| | Self-Employed | Attorney | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | |
| — В. | Full Name (Last, First, Middle Initial) Manuel D. Montalvo | | Date of Receipt |
| υ. | Mailing Address 1733 Ave. Jesus T. Pinero | 11 02 2012 | |
| | City San Juan | State Zip Code PR 00918 | Transaction ID : SA11AI.10799 |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period |
| | Name of Employer | Occupation | 500.00 |
| | self employed | Certified Public Accountant | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 950.00 | |
| _ | Full Name (Last, First, Middle Initial) Vilma Morales | | Date of Receipt |
| C. | Mailing Address C24 Urb. Garcia | | 10 20 2012 |
| | City San Juan | State Zip Code PR 00926 | Transaction ID : SA11AI.10449 |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period |
| | ame of Employer Occupation elf-Employed Attorney | | 300.00 |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | |
| Г | GUBTOTAL of Receipts This Page (optional) | | 1800.00 |
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TOTAL This Period (last page this line number only).....

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Form/Schedule: SA11AI

Transaction ID : SA11AI.10363

When receiving a contribution, Fundraising Coordinators must provide Form-003 to the contributor. Form establishes that this candidacy is a federal campaign subject to compliance with the FECA and regulations of the FEC and the law requires us to register the personal information of our contributors. Form-003 requires: Name, Mailing Address, Phone Number, ID Number, if the person is US citizen or legal resident (Gren Card), occupation, employer, if self-employed, the name of the company, date and email. The staffer must revise the forms and complete a report for compliance staff within 24 hours after the contribution. Compliance staff must revise the report and return it to the Fundraising Coordinator with the findings on 24 hours. The fundraising staffer must correct the report by contacting the contributor by email, phone or mail asking for the missing information on 24 hours. If staffer is unable to contact the contributor, must contact the fundraising organizer and ask for other contact info of the contributor. The fundraising coordinator must make a second effort to contact the contributor by email, phone or mail and report the information within 7 days. Compliance division and fundraising division must have follow-up sessions weekly to review the missing information status. Cox Alomar 2012, Inc. continues the efforts to complete the contributor's missing information.

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for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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) Gilda Nadal Date of Receipt Mailing Address PO Box 360964 10 2012 27 City State Zip Code Transaction ID: SA11AI.10651 PR 00936 San Juan FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 100.00 Name of Employer Occupation Sucesion J.A. Nadal-Geigel Administrator Receipt For: 2012 Election Cycle-to-Date Primary X General 525.00 Other (specify) Full Name (Last, First, Middle Initial) Jose Najul Zambrana Date of Receipt Mailing Address PO Box 1868 26 2012 City State Zip Code Transaction ID: SA11AI.10525 Arecibo PR 00613 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 200.00 Name of Employer Occupation Medical Doctor Self-Employed Receipt For: 2012 Election Cycle-to-Date Meneral Control Primary 250.00 Other (specify) Full Name (Last, First, Middle Initial) Sally Narvaez Ortiz Date of Receipt Mailing Address Calle 4 G-13 2012 01 Ext. Colinas Verdes City Zip Code State Transaction ID: SA11AI.10797 PR San Juan 00924 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Reichard & Escalera Assistant Reimbursement Local Deposit Receipt For: 2012 Election Cycle-to-Date X General Primary 500.00 Other (specify) 800.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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| Any information copied from such Reports a | nd Statements may not be sold or used by any p | person for the purpose of soliciting contributions |
|---|---|--|
| | g the name and address of any political committee | e to solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | |
| Full Name (Last, First, Middle Initial) Maria J. Oquendo Delgado | | Date of Receipt |
| Mailing Address PO Box 9021712 | | 10 18 2012 |
| City San Juan | State Zip Code PR 00902-1712 | Transaction ID : SA11AI.10497 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period |
| Name of Employer Empresas Intec Puerto Rico | Occupation President | 250.00 |
| Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | |
| Full Name (Last, First, Middle Initial) Nestor Ortiz | | Date of Receipt |
| Mailing Address PO Box 9121 | | 10 19 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Humacao | State Zip Code PR 00792 | Transaction ID : SA11AI.10479 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period |
| Name of Employer | Occupation | 250.00 |
| Self-Employed Receipt For: 2012 | Attorney Floation Cycle to Date | _ |
| Primary General Other (specify) | Election Cycle-to-Date 250.00 | |
| Full Name (Last, First, Middle Initial) Pedro Ortiz Alvaraez | | Date of Receipt |
| Mailing Address PO Box 9009 | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Ponce | State Zip Code PR 00732 | Transaction ID : SA11AI.10085 |
| FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period |
| Name of Employer | Occupation Attorney | 2000.00 |
| Self-Employed Receipt For: 2012 | Election Cycle-to-Date | |
| Primary Seneral Other (specify) | 2000.00 | |
| |)ber only) | 2500.00 |

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

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

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| | and Statements may not be sold or used by any p ng the name and address of any political committed | | | | | |
|--|---|------------------------------------|--|--|--|--|
| NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | | | | | |
| Full Name (Last, First, Middle Initial) Edisson Osorio Cueva | | | | | | |
| A. Mailing Address PO Box 169 | | Date of Receipt | | | | |
| City | State 7in Code | 11 02 2012 | | | | |
| City Rincon | State Zip Code PR 00677 | Transaction ID : SA11AI.10304 | | | | |
| FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | | |
| Name of Employer Self-Employed | Occupation Medical Doctor | 1000.00 | | | | |
| Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | | | | | |
| Full Name (Last, First, Middle Initial) Orlando J. Perez Rodriguez | • | Date of Receipt | | | | |
| Mailing Address Villas de Parana S8-15 Street 8 | | 10 27 2012 | | | | |
| City San Juan | State Zip Code PR 00926 | Transaction ID : SA11AI.10334 | | | | |
| FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | | |
| Name of Employer | Occupation | 200.00 | | | | |
| UBS | Consultant | | | | | |
| Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | | | | | |
| Full Name (Last, First, Middle Initial) Yoly Prohias | | Date of Receipt | | | | |
| Mailing Address PO Box 192273 | | 10 23 2012 | | | | |
| City San Juan | State Zip Code PR 00919 | Transaction ID : SA11AI.10626 | | | | |
| FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | | |
| Name of Employer | Occupation | 200.00 | | | | |
| Self-Employed | Chef | | | | | |
| Receipt For: 2012 | Election Cycle-to-Date | | | | | |
| Primary X General Other (specify) | 2317.24 | | | | | |
| SUBTOTAL of Receipts This Page (options | al) | 1400.00 | | | | |

FOR LINE NUMBER: PAGE 41 OF 133 Use separate schedule(s) (check only one) for each category of the 11a 11b 11d 11c Detailed Summary Page 12 13a 13b 14

ITEMIZED RECEIPTS 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) Caridad M. Purcell Ruiz Date of Receipt Mailing Address Cond. Parque de Las Fuentes 10 2012 22 690 Cesar Gonzalez Apto. 1402 City State Zip Code Transaction ID: SA11AI.10770 PR 00918 San Juan FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 200.00 Name of Employer Occupation Retired Retired Receipt For: 2012 Election Cycle-to-Date Primary X General 400.00 Other (specify) Full Name (Last, First, Middle Initial) Caridad M. Purcell Ruiz Date of Receipt Mailing Address Cond. Parque de Las Fuentes 30 2012 690 Cesar Gonzalez Apto. 1402 Citv State Zip Code Transaction ID: SA11AI.10540 San Juan PR 00918 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation Retired Retired Receipt For: 2012 Election Cycle-to-Date Primary Meneral Control 500.00 Other (specify) Full Name (Last, First, Middle Initial) **Edwin Quinones Porrata** Date of Receipt Mailing Address Urb. Garden Hills Z21 2012 18 Hasting St. City State Zip Code Transaction ID: SA11AI.10464 PR Guaynabo 00966 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Quinones & Arbona Attorney Receipt For: 2012 Election Cycle-to-Date X General Primary 250.00 Other (specify) 550.00 SUBTOTAL of Receipts This Page (optional).....

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

FOR LINE NUMBER: **PAGE** 42 OF (check only one) 11a 11b 11d 11c

133

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 12 13a 13b 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) COX ALOMAR 2012 INC Full Name (Last, First, Middle Initial) Miguel Ramirez Cuevas Date of Receipt Mailing Address PO Box 8921 10 2012 28 City State Zip Code Transaction ID: SA11AI.10562 PR 00910 San Juan FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 25.00 Name of Employer Occupation Retired Retired Receipt For: 2012 Election Cycle-to-Date Primary X General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Emilio Rivera Date of Receipt Mailing Address PMB 104 01 2012 8485 Los Romeros Ave City State Zip Code Transaction ID: SA11AI.10332 San Juan PR 00926 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Receipt For: 2012 Election Cycle-to-Date Primary Meneral Control 500.00 Other (specify) Full Name (Last, First, Middle Initial) Jose Rivera Badui Date of Receipt Mailing Address Jardines de Arroyo 2012 21 A 119 Calle Cc City State Zip Code Transaction ID: SA11AI.10788 PR Arroyo 00714 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Self-Employed Medical Doctor Receipt For: 2012 Election Cycle-to-Date Primary General 250.00 Other (specify) 775.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

1mage# 13961071217 PAGE 43 / 133

: 97 A = G7 9 @ G5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHZ'G7 < 98 I @ 'CF' ≠ H9 A = N5 H= CB

Form/Schedule: SA11AI

Transaction ID : SA11AI.10332

When receiving a contribution, Fundraising Coordinators must provide Form-003 to the contributor. Form establishes that this candidacy is a federal campaign subject to compliance with the FECA and regulations of the FEC and the law requires us to register the personal information of our contributors. Form-003 requires: Name, Mailing Address, Phone Number, ID Number, if the person is US citizen or legal resident (Gren Card), occupation, employer, if self-employed, the name of the company, date and email. The staffer must revise the forms and complete a report for compliance staff within 24 hours after the contribution. Compliance staff must revise the report and return it to the Fundraising Coordinator with the findings on 24 hours. The fundraising staffer must correct the report by contacting the contributor by email, phone or mail asking for the missing information on 24 hours. If staffer is unable to contact the contributor, must contact the fundraising organizer and ask for other contact info of the contributor. The fundraising coordinator must make a second effort to contact the contributor by email, phone or mail and report the information within 7 days. Compliance division and fundraising division must have follow-up sessions weekly to review the missing information status. Cox Alomar 2012, Inc. continues the efforts to complete the contributor's missing information.

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

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

| FOF | R LINE | e number: [| | | PAGE | - 4 | 44 | OF | | 133 |
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| | 11a | | 11b | | 11c | | 11 | d | | |
| | 12 | | 13a | | 13b | | 14 | | | 15 |

| | | Statements may not be sold or used by any per name and address of any political committee | |
|------------------------|---|--|------------------------------------|
| $\left \right\rangle$ | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | |
| <u>Г</u> | Full Name (Last, First, Middle Initial) Luis Rivera Cabrera | | Date of Receipt |
| ۸. | Mailing Address PO Box 9023826 | | 11 18 2012 |
| | City | State Zip Code | Transaction ID : SA11AI.10554 |
| | San Juan | PR 00902 | _ |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period |
| | Name of Employer | Occupation | 250.00 |
| | Self-Employed | Attorney | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | |
| — В. | Full Name (Last, First, Middle Initial) Mae Rivera Janer | | Date of Receipt |
| υ. | Mailing Address 554 Perseo St. Apt 1101 | 10 18 2012 | |
| | City San Juan | State Zip Code PR 00920 | Transaction ID : SA11AI.10491 |
| | FEC ID number of contributing federal political committee. | Amount of Each Receipt this Period | |
| | Name of Employer | Occupation | 125.00 |
| | unemployed | Homemaker | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | |
| _ | Full Name (Last, First, Middle Initial) Mae Rivera Janer | | Date of Receipt |
| C. | Mailing Address 554 Perseo St. Apt 1101 | | 10 27 2012 |
| | City San Juan | State Zip Code PR 00920 | Transaction ID : SA11AI.10336 |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period |
| | Name of Employer unemployed | Occupation Homemaker | 200.00 |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | |
| s | SUBTOTAL of Receipts This Page (optional) | | 575.00 |
| T | 'OTAL This Period (last page this line number | only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

| FOR LINE I | NUMBER: | PAGE | 45 OF | 133 |
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| | | Statements may not be sold or used by any pere name and address of any political committee | | | | | | |
|----------|--|--|---|--|--|--|--|--|
| | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) Carlos Rodriguez Mailing Address Box 10208 | | Date of Receipt | | | | | |
| | BOX 10200 | | 10 20 2012 | | | | | |
| | City San Juan | State Zip Code PR 00922 | Transaction ID : SA11AI.10349 | | | | | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period 500.00 | | | | | |
| | Name of Employer | Occupation | 300.00 | | | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | | | | | | |
| В. | Full Name (Last, First, Middle Initial) Jose Rodriguez Escudero | | Date of Receipt | | | | | |
| | Mailing Address PMB 400 701-1 | | 10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | | |
| | City San Juan | State Zip Code PR 00907 | Transaction ID : SA11AI.10522 | | | | | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | | | |
| | Name of Employer | Occupation | 250.00 | | | | | |
| | Self-Employed Receipt For: 2012 | Medical Doctor | | | | | | |
| | Primary General Other (specify) | Election Cycle-to-Date 250.00 | | | | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) Gamalier Rodriguez Mercado | | Date of Receipt | | | | | |
| O. | Mailing Address Palacios de Escorial Edif. 1 Apto. 1-10 | 7. 0.4 | 10 18 2012 | | | | | |
| | City Carolina | State Zip Code PR 00987 | Transaction ID : SA11AI.10430 | | | | | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | | | |
| | Name of Employer | Occupation | 250.00 | | | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | | | | | | |
| s | UBTOTAL of Receipts This Page (optional) | | 1000.00 | | | | | |
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Image# 13961071220 PAGE 46 / 133

: 97 'A = G7 9 @ 65 B9 C1 G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHZ G7 < 98 L @ 'CF' = H9 A = N5 H= CB

Form/Schedule: SA11AI

Transaction ID : SA11AI.10349

When receiving a contribution, Fundraising Coordinators must provide Form-003 to the contributor. Form establishes that this candidacy is a federal campaign subject to compliance with the FECA and regulations of the FEC and the law requires us to register the personal information of our contributors. Form-003 requires: Name, Mailing Address, Phone Number, ID Number, if the person is US citizen or legal resident (Gren Card), occupation, employer, if self-employed, the name of the company, date and email. The staffer must revise the forms and complete a report for compliance staff within 24 hours after the contribution. Compliance staff must revise the report and return it to the Fundraising Coordinator with the findings on 24 hours. The fundraising staffer must correct the report by contacting the contributor by email, phone or mail asking for the missing information on 24 hours. If staffer is unable to contact the contributor, must contact the fundraising organizer and ask for other contact info of the contributor. The fundraising coordinator must make a second effort to contact the contributor by email, phone or mail and report the information within 7 days. Compliance division and fundraising division must have follow-up sessions weekly to review the missing information status. Cox Alomar 2012, Inc. continues the efforts to complete the contributor's missing information.

Form/Schedule: SA11AI Transaction ID: SA11AI.10430

When receiving a contribution, Fundraising Coordinators must provide Form-003 to the contributor. Form establishes that this candidacy is a federal campaign subject to compliance with the FECA and regulations of the FEC and the law requires us to register the personal information of our contributors. Form-003 requires: Name, Mailing Address, Phone Number, ID Number, if the person is US citizen or legal resident (Gren Card), occupation, employer, if self-employed, the name of the company, date and email. The staffer must revise the forms and complete a report for compliance staff within 24 hours after the contribution. Compliance staff must revise the report and return it to the Fundraising Coordinator with the findings on 24 hours. The fundraising staffer must correct the report by contacting the contributor by email, phone or mail asking for the missing information on 24 hours. If staffer is unable to contact the contributor, must contact the fundraising organizer and ask for other contact info of the contributor. The fundraising coordinator must make a second effort to contact the contributor by email, phone or mail and report the information within 7 days. Compliance division and fundraising division must have follow-up sessions weekly to review the missing information status. Cox Alomar 2012, Inc. continues the efforts to complete the contributor's missing information.

133 FOR LINE NUMBER: **PAGE** 47 OF Use separate schedule(s) (check only one) 11a 11b 11d 11c 12

for each category of the ITEMIZED RECEIPTS Detailed Summary Page 13a 13b 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) Alfonso Rodriguez Ramos Date of Receipt Mailing Address Atalaya D-12 2012 23 La Arboleda City State Zip Code Transaction ID: SA11AI.10543 PR 00966 Guaynabo FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation Receipt For: 2012 Election Cycle-to-Date Primary X General 650.00 Other (specify) Full Name (Last, First, Middle Initial) **Tomas Roman Santos** Date of Receipt Mailing Address Qtas. de Cupey 26 2012 14 St. Apto. F207 City State Zip Code Transaction ID: SA11AI.10606 San Juan PR 00926 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Fiddler, Gonzalez & Rodriguez Attorney Receipt For: 2012 Election Cycle-to-Date Primary ✓ General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **David Salas** Date of Receipt Mailing Address 446 West Mount Airy Ave. 2012 30 City State Zip Code Transaction ID: SA11AI.10520 PΑ Philadelphia 19119 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Receipt For: 2012 Election Cycle-to-Date Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Image# 13961071222 PAGE 48 / 133

: 97 'A = G7 9 @ 65 B9 CIG'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHZ'G7 < 98 I @ 9 'CF' ± H9 A ± N5 H± CB

Form/Schedule: SA11AI Transaction ID: SA11AI.10543

When receiving a contribution, Fundraising Coordinators must provide Form-003 to the contributor. Form establishes that this candidacy is a federal campaign subject to compliance with the FECA and regulations of the FEC and the law requires us to register the personal information of our contributors. Form-003 requires: Name, Mailing Address, Phone Number, ID Number, if the person is US citizen or legal resident (Gren Card), occupation, employer, if self-employed, the name of the company, date and email. The staffer must revise the forms and complete a report for compliance staff within 24 hours after the contribution. Compliance staff must revise the report and return it to the Fundraising Coordinator with the findings on 24 hours. The fundraising staffer must correct the report by contacting the contributor by email, phone or mail asking for the missing information on 24 hours. If staffer is unable to contact the contributor, must contact the fundraising organizer and ask for other contact info of the contributor. The fundraising coordinator must make a second effort to contact the contributor by email, phone or mail and report the information within 7 days. Compliance division and fundraising division must have follow-up sessions weekly to review the missing information status. Cox Alomar 2012, Inc. continues the efforts to complete the contributor's missing information.

Form/Schedule: SA11AI Transaction ID: SA11AI.10520

When receiving a contribution, Fundraising Coordinators must provide Form-003 to the contributor. Form establishes that this candidacy is a federal campaign subject to compliance with the FECA and regulations of the FEC and the law requires us to register the personal information of our contributors. Form-003 requires: Name, Mailing Address, Phone Number, ID Number, if the person is US citizen or legal resident (Gren Card), occupation, employer, if self-employed, the name of the company, date and email. The staffer must revise the forms and complete a report for compliance staff within 24 hours after the contribution. Compliance staff must revise the report and return it to the Fundraising Coordinator with the findings on 24 hours. The fundraising staffer must correct the report by contacting the contributor by email, phone or mail asking for the missing information on 24 hours. If staffer is unable to contact the contributor, must contact the fundraising organizer and ask for other contact info of the contributor. The fundraising coordinator must make a second effort to contact the contributor by email, phone or mail and report the information within 7 days. Compliance division and fundraising division must have follow-up sessions weekly to review the missing information status. Cox Alomar 2012, Inc. continues the efforts to complete the contributor's missing information.

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

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

| FOR | LINE | NU | MBER: | PAGE | : 4 | 49 OF | - | 133 |
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| _ | ny information copied from such Description 1 | Statements may not be said as used by | 12 |
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| Or | for commercial purposes, other than using the | Statements may not be sold or used by any pe e name and address of any political committee | to solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | |
| Α. | Full Name (Last, First, Middle Initial) Nilda Saldana Egozcue | | Date of Receipt |
| | Mailing Address Cond Park Terrace | | M M / D D / Y Y Y Y |
| | 1501 Ashford Ave. Apt. 5 City | State Zip Code | 10 18 2012 |
| | San Juan | PR 00911 | Transaction ID : SA11AI.10474 |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period |
| | Name of Employer | Occupation | 125.00 |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 325.00 | |
| В. | Full Name (Last, First, Middle Initial) Maria L. Santaella Arguinzoni | | Date of Receipt |
| | Mailing Address PO Box 366676 | | 10 23 2012 |
| | City | State Zip Code | Transaction ID : SA11AI.10590 |
| | San Juan | PR 00936 | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period |
| | Name of Employer | Occupation | 268.71 |
| | unemployed | Retired | In-kind - Fundraising decoration expenses |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 3297.12 | |
| _ | Full Name (Last, First, Middle Initial) | | |
| C. | Maria L. Santaella Arguinzoni | | Date of Receipt |
| | Mailing Address PO Box 366676 | Chata 7in Cada | 10 24 2012 |
| | City San Juan | State Zip Code PR 00936 | Transaction ID : SA11AI.10589 |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period |
| | Name of Employer | Occupation | 399.60 |
| | unemployed | Retired | In-kind - Fundraising Rentals-chairs and tables |
| | Receipt For: 2012 | Election Cycle-to-Date | |
| | Primary X General Other (specify) | 3696.72 | |
| Г | SUBTOTAL of Receipts This Page (optional) | | 793.31 |
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1mage# 13961071224 PAGE 50 / 133

: 97 'A = G7 9 @ 65 B9 CI G'H9 LH F9 @ 5 H98 'HC' 5 'F9 DC FHŽ G7 < 98 I @ 9 'C F' + H9 A = N 5 H + C B

Form/Schedule: SA11AI

Transaction ID : SA11AI.10474

When receiving a contribution, Fundraising Coordinators must provide Form-003 to the contributor. Form establishes that this candidacy is a federal campaign subject to compliance with the FECA and regulations of the FEC and the law requires us to register the personal information of our contributors. Form-003 requires: Name, Mailing Address, Phone Number, ID Number, if the person is US citizen or legal resident (Gren Card), occupation, employer, if self-employed, the name of the company, date and email. The staffer must revise the forms and complete a report for compliance staff within 24 hours after the contribution. Compliance staff must revise the report and return it to the Fundraising Coordinator with the findings on 24 hours. The fundraising staffer must correct the report by contacting the contributor by email, phone or mail asking for the missing information on 24 hours. If staffer is unable to contact the contributor, must contact the fundraising organizer and ask for other contact info of the contributor. The fundraising coordinator must make a second effort to contact the contributor by email, phone or mail and report the information within 7 days. Compliance division and fundraising division must have follow-up sessions weekly to review the missing information status. Cox Alomar 2012, Inc. continues the efforts to complete the contributor's missing information.

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

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

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| Any information copied from such Reports and or for commercial purposes, other than using t | Statements n | nay r addr | not be solo | d or used b | y any pe ommittee | rson to s | for the | e pu | urpose o | of soliciti | ing contri | butions nittee. |
| NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | | , | · | | | | | | | | |
| Full Name (Last, First, Middle Initial) Maria L. Santaella Arguinzoni | | | | | | | Date of | f De | ooint | | | |
| Mailing Address PO Box 366676 | | | | | | | M M M 10 | _ | 24 | | 2012 | Y |
| City | State | | Zip Code | | | Tre | neact | lion | ID - 64 | 11AI.105 | 05 | |
| San Juan | PR | | 00936 | | | - 116 | ansacı | lion | ID . SA | TIALIUS | 193 | |
| FEC ID number of contributing federal political committee. | C | Ξ | | | | <i>A</i> | Amoun | t of | Each F | Receipt th | his Period | |
| Name of Employer | Occupatio | n | | | | 1 | | | , | | 104 | 1.75 |
| unemployed | Retired | | | | | In | -kind - | Fur | ndraisin | g meals | | |
| Receipt For: 2012 | Election C | Cycle- | -to-Date | | | 1 | | | | | | |
| Primary General | | , | | | _ | | | | | | | |
| Other (specify) | L | 7 | | 3801 | .47 | | | | | | | |
| Full Name (Last, First, Middle Initial) Maria L. Santaella Arguinzoni | | | | | | | Date o | f Re | eceipt | | | |
| Mailing Address PO Box 366676 | | | | | | 1 | м в м | / | 27 | | 2012 | Υ |
| City | State | | Zip Code | | | 1 . | | | ID - CA | 44 41 405 | 04 | |
| San Juan | PR | | 00936 | | | Ira | ansact | ion | ID : 5A | 11AI.105 | 91 | |
| FEC ID number of contributing federal political committee. | С | | | | | , | Amoun | nt of | Each F | Receipt t | his Period | |
| Name of Employer | Occupatio | n | | | | 1 | | | | | 800 | 0.00 |
| unemployed | Retired | | | | | In | -kind - | Fur | ndraising | g Meals a | and Bever | ages |
| Receipt For: 2012 | Election C | Cvcle- | -to-Date | | | 1 | | | | | | |
| Primary General | | , | | | | | | | | | | |
| Other (specify) | L | | | 4601. | 47 | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | Τ. | | | | | | |
| c. Maria del Socorro Santaella Ar | guinzoni | | | | | _ ' | Date of | t Re | eceipt | | | |
| Mailing Address PO Box 9023148 City | State | | Zin Codo | | | | 10 | / | 18 | | 2012 | Y |
| San Juan | PR | | Zip Code 00902 | | | Tr | ansact | tion | ID : SA | \11AI.10 | 505 | |
| FEC ID number of contributing federal political committee. | С | _ | | | | , | Amoun | nt of | Each F | Receipt t | his Period | d |
| Name of Employer | Occupation | n | | | | 1 | | | | | 250 | 0.00 |
| IUPR-Law School | Attorney | | | | | | | | 1 | , | | |
| Receipt For: 2012 | Election C | :vcle | -to-Date | | | - | | | | | | |
| Primary Seneral | LICCION | y Cle | io Date | | | | | | | | | |
| Other (specify) | | | | 250 | .00 | | | | | | | |
| SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number | | | | | _ | | | ÷ | | | 1154 | .75 |

52 OF 133 FOR LINE NUMBER: **PAGE** Use separate schedule(s) (check only one) for each category of the 11a 11b 11d 11c Detailed Summary Page 12 13a 13b 14

ITEMIZED RECEIPTS 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) Juan Santiago Alvarado Date of Receipt Mailing Address PO Box 771 10 2012 29 City State Zip Code Transaction ID: SA11AI.10781 PR 00757 Santa Isabel FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 300.00 Name of Employer Occupation Receipt For: 2012 Election Cycle-to-Date Primary X General 400.00 Other (specify) Full Name (Last, First, Middle Initial) Yasmin Santiago Zayas Date of Receipt Mailing Address Parkville Wilson N-21 18 2012 City State Zip Code Transaction ID: SA11AI.10548 Guaynabo PR 00969 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Self-Employed Attorney Receipt For: 2012 Election Cycle-to-Date Meneral Control Primary 500.00 Other (specify) Full Name (Last, First, Middle Initial) Jose R. Santos Date of Receipt Mailing Address Box 8396 2012 18 City State Zip Code Transaction ID: SA11AI.10676 PR 00792 Humacao FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 125.00 Name of Employer Occupation Self-Employed Attorney Receipt For: 2012 Election Cycle-to-Date General Primary 325.00 Other (specify) 925.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

1mage# 13961071227 PAGE 53 / 133

: 97 'A = G7 9 @ 65 B9 CI G'H9 LH F9 @ 5 H98 'HC' 5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N 5 H + C B

Form/Schedule: SA11AI

Transaction ID : SA11AI.10781

When receiving a contribution, Fundraising Coordinators must provide Form-003 to the contributor. Form establishes that this candidacy is a federal campaign subject to compliance with the FECA and regulations of the FEC and the law requires us to register the personal information of our contributors. Form-003 requires: Name, Mailing Address, Phone Number, ID Number, if the person is US citizen or legal resident (Gren Card), occupation, employer, if self-employed, the name of the company, date and email. The staffer must revise the forms and complete a report for compliance staff within 24 hours after the contribution. Compliance staff must revise the report and return it to the Fundraising Coordinator with the findings on 24 hours. The fundraising staffer must correct the report by contacting the contributor by email, phone or mail asking for the missing information on 24 hours. If staffer is unable to contact the contributor, must contact the fundraising organizer and ask for other contact info of the contributor. The fundraising coordinator must make a second effort to contact the contributor by email, phone or mail and report the information within 7 days. Compliance division and fundraising division must have follow-up sessions weekly to review the missing information status. Cox Alomar 2012, Inc. continues the efforts to complete the contributor's missing information.

54 OF 133 FOR LINE NUMBER: **PAGE** Use separate schedule(s) (check only one) for each category of the ITEMIZED RECEIPTS 11a 11b 11d 11c Detailed Summary Page 12 13a 13b 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) COX ALOMAR 2012 INC Full Name (Last, First, Middle Initial) Julio A. Santos Date of Receipt Mailing Address Urb. La Colina B, #6 2012 13 Los Filtros City State Zip Code Transaction ID: SA11AI.10317 PR 00969 Guaynabo FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 800.00 Name of Employer Occupation Receipt For: 2012 Election Cycle-to-Date Primary X General 800.00 Other (specify) Full Name (Last, First, Middle Initial) Jose Silva Cofresi Date of Receipt Mailing Address Urb. Montehiedra 24 2012 73 Carpintero St. City State Zip Code Transaction ID: SA11AI.10603 San Juan PR 00926 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation Fiddler, Gonzalez & Rodriguez Lawyer Receipt For: 2012 Election Cycle-to-Date Primary Meneral Control 300.00 Other (specify) Full Name (Last, First, Middle Initial) Lorelei Simonet Albors Date of Receipt Mailing Address PO Box 1842 2012 01 City State Zip Code Transaction ID: SA11AI.10321 PR Mayaguez 00681 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 600.00 Name of Employer Occupation Receipt For: 2012 Election Cycle-to-Date X General Primary 600.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional).....

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

1mage# 13961071229 PAGE 55 / 133

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Form/Schedule: SA11AI

Transaction ID : SA11AI.10317

When receiving a contribution, Fundraising Coordinators must provide Form-003 to the contributor, Form establishes that this candidacy is a federal campaign subject to compliance with the FECA and regulations of the FEC and the law requires us to register the personal information of our contributors. Form-003 requires: Name, Mailing Address, Phone Number, ID Number, if the person is US citizen or legal resident (Gren Card), occupation, employer, if self-employed, the name of the company, date and email. The staffer must revise the forms and complete a report for compliance staff within 24 hours after the contribution. Compliance staff must revise the report and return it to the Fundraising Coordinator with the findings on 24 hours. The fundraising staffer must correct the report by contacting the contributor by email, phone or mail asking for the missing information on 24 hours. If staffer is unable to contact the contributor, must contact the fundraising organizer and ask for other contact info of the contributor. The fundraising coordinator must make a second effort to contact the contributor by email, phone or mail and report the information within 7 days. Compliance division and fundraising division must have follow-up sessions weekly to review the missing information status. Cox Alomar 2012. Inc. continues the efforts to complete the contributor's missing information.

Form/Schedule: SA11AI Transaction ID: SA11AI.10321

> When receiving a contribution, Fundraising Coordinators must provide Form-003 to the contributor. Form establishes that this candidacy is a federal campaign subject to compliance with the FECA and regulations of the FEC and the law requires us to register the personal information of our contributors. Form-003 requires: Name, Mailing Address, Phone Number, ID Number, if the person is US citizen or legal resident (Gren Card), occupation, employer, if self-employed, the name of the company, date and email. The staffer must revise the forms and complete a report for compliance staff within 24 hours after the contribution. Compliance staff must revise the report and return it to the Fundraising Coordinator with the findings on 24 hours. The fundraising staffer must correct the report by contacting the contributor by email, phone or mail asking for the missing information on 24 hours. If staffer is unable to contact the contributor. must contact the fundraising organizer and ask for other contact info of the contributor. The fundraising coordinator must make a second effort to contact the contributor by email, phone or mail and report the information within 7 days. Compliance division and fundraising division must have follow-up sessions weekly to review the missing information status. Cox Alomar 2012, Inc. continues the efforts to complete the contributor's missing information.

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

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

| FOR LINE | NUMBER | : PAGE | 56 OF | 133 |
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| | and Statements may not be sold or used by any p ng the name and address of any political committe | | | | | |
|--|--|------------------------------------|--|--|--|--|
| NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | | | | | |
| Full Name (Last, First, Middle Initial) Jose Sobrino Catoni | | Pole (Posid | | | | |
| Mailing Address Tore San Pablo Suite 50: | Date of Receipt 10 23 2012 | | | | | |
| City Bayamon | State Zip Code PR 00961 | Transaction ID : SA11AI.9914 | | | | |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period | | | | |
| Name of Employer self employed | | | | | | |
| Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | | | | | |
| Full Name (Last, First, Middle Initial) Jaime Sorrentini | Date of Receipt | | | | | |
| Mailing Address Apartado 29997 | 10 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | | |
| City San Juan | · | | | | | |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period | | | | |
| Name of Employer | Occupation | 300.00 | | | | |
| Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | | | | | |
| Full Name (Last, First, Middle Initial) Jose Sosa Llorens | | Date of Receipt | | | | |
| Mailing Address Box 363507 | | | | | | |
| City San Juan | State Zip Code PR 00936 | Transaction ID : SA11AI.10601 | | | | |
| FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | | |
| Name of Employer | Occupation | 250.00 | | | | |
| Fiddler, Gonzalez & Rodriguez Receipt For: 2012 Primary General Other (specify) | Receipt For: 2012 Election Cycle-to-Date Primary General | | | | | |
| SUBTOTAL of Receipts This Page (optional | al) | 1550.00 | | | | |

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Form/Schedule: SA11AI

Transaction ID : SA11AI.10533

When receiving a contribution, Fundraising Coordinators must provide Form-003 to the contributor. Form establishes that this candidacy is a federal campaign subject to compliance with the FECA and regulations of the FEC and the law requires us to register the personal information of our contributors. Form-003 requires: Name, Mailing Address, Phone Number, ID Number, if the person is US citizen or legal resident (Gren Card), occupation, employer, if self-employed, the name of the company, date and email. The staffer must revise the forms and complete a report for compliance staff within 24 hours after the contribution. Compliance staff must revise the report and return it to the Fundraising Coordinator with the findings on 24 hours. The fundraising staffer must correct the report by contacting the contributor by email, phone or mail asking for the missing information on 24 hours. If staffer is unable to contact the contributor, must contact the fundraising organizer and ask for other contact info of the contributor. The fundraising coordinator must make a second effort to contact the contributor by email, phone or mail and report the information within 7 days. Compliance division and fundraising division must have follow-up sessions weekly to review the missing information status. Cox Alomar 2012, Inc. continues the efforts to complete the contributor's missing information.

FOR LINE NUMBER: **PAGE** 58 OF (check only one) 11a 11b 11d 11c 12

133 Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 13a 13b 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) COX ALOMAR 2012 INC Full Name (Last, First, Middle Initial) Luis Sotomayor Agosto Date of Receipt Mailing Address Box 26900 Carr. 743 2012 05 Bo. Vega City State Zip Code Transaction ID: SA11AI.10310 PR 00736 Cayey FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 2500.00 Name of Employer Occupation Receipt For: 2012 Election Cycle-to-Date Primary X General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) Rafael Stella Ferrer Date of Receipt Mailing Address PO Box 1600 Suite 864 19 2012 City State Zip Code Transaction ID: SA11AI.9873 Cidra PR 00739-1600 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2000.00 Name of Employer Occupation Contribution via ACH Maristella, Inc. Manager Receipt For: 2012 Election Cycle-to-Date ✓ General Primary 2200.00 Other (specify) Full Name (Last, First, Middle Initial) Roberto Suarez Sein Date of Receipt Mailing Address Bolivia Street 33, 5th Floor 2012 31 City Zip Code State Transaction ID: SA11AI.10294 PR San Juan 00917 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1500.00 Name of Employer Occupation Self-Employed Lawyer Receipt For: 2012 Election Cycle-to-Date Primary General 2500.00 Other (specify) 6000.00 SUBTOTAL of Receipts This Page (optional).....

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

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: 97 'A = G7 9 @ 65 B9 CIG'H9 LH'F9 @ 5 H98 'HC'5 'F9 DC FHŽG7 < 98 I @ 9 'C F' + H9 A → N5 H= C B

Form/Schedule: SA11AI

Transaction ID : SA11AI.10310

When receiving a contribution, Fundraising Coordinators must provide Form-003 to the contributor. Form establishes that this candidacy is a federal campaign subject to compliance with the FECA and regulations of the FEC and the law requires us to register the personal information of our contributors. Form-003 requires: Name, Mailing Address, Phone Number, ID Number, if the person is US citizen or legal resident (Gren Card), occupation, employer, if self-employed, the name of the company, date and email. The staffer must revise the forms and complete a report for compliance staff within 24 hours after the contribution. Compliance staff must revise the report and return it to the Fundraising Coordinator with the findings on 24 hours. The fundraising staffer must correct the report by contacting the contributor by email, phone or mail asking for the missing information on 24 hours. If staffer is unable to contact the contributor, must contact the fundraising organizer and ask for other contact info of the contributor. The fundraising coordinator must make a second effort to contact the contributor by email, phone or mail and report the information within 7 days. Compliance division and fundraising division must have follow-up sessions weekly to review the missing information status. Cox Alomar 2012, Inc. continues the efforts to complete the contributor's missing information.

133 FOR LINE NUMBER: **PAGE** 60 OF (check only one) 11a 11b 11d 11c 12 13a 13b 14

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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) Luis C. Torrellas Perrier Date of Receipt Mailing Address PO Box 215 10 2012 27 City State Zip Code Transaction ID: SA11AI.10646 PR 00792 Humacao FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 200.00 Name of Employer Occupation Self-Employed Architect Receipt For: 2012 Election Cycle-to-Date X General Primary 400.00 Other (specify) Full Name (Last, First, Middle Initial) Luis C. Torrellas Ruiz Date of Receipt Mailing Address Calle Dufresne 5 27 2012 City State Zip Code Transaction ID: SA11AI.10671 Humacao PR 00791 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 400.00 Name of Employer Occupation Medical Doctor Self-Employed Receipt For: 2012 Election Cycle-to-Date Meneral Control Primary 800.00 Other (specify) Full Name (Last, First, Middle Initial) **Esther Torres Marcano** Date of Receipt Mailing Address 2012 01 City State Zip Code Transaction ID: SA11AI.10337 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 700.00 Name of Employer Occupation Receipt For: 2012 Election Cycle-to-Date Primary General 700.00 Other (specify) 1300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

1mage# 13961071235 PAGE 61 / 133

: 97 A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHZ'G7 < 98 I @ 'CF' ± H9 A ± N5 H± CB

Form/Schedule: SA11AI

Transaction ID : SA11AI.10337

When receiving a contribution, Fundraising Coordinators must provide Form-003 to the contributor. Form establishes that this candidacy is a federal campaign subject to compliance with the FECA and regulations of the FEC and the law requires us to register the personal information of our contributors. Form-003 requires: Name, Mailing Address, Phone Number, ID Number, if the person is US citizen or legal resident (Gren Card), occupation, employer, if self-employed, the name of the company, date and email. The staffer must revise the forms and complete a report for compliance staff within 24 hours after the contribution. Compliance staff must revise the report and return it to the Fundraising Coordinator with the findings on 24 hours. The fundraising staffer must correct the report by contacting the contributor by email, phone or mail asking for the missing information on 24 hours. If staffer is unable to contact the contributor, must contact the fundraising organizer and ask for other contact info of the contributor. The fundraising coordinator must make a second effort to contact the contributor by email, phone or mail and report the information within 7 days. Compliance division and fundraising division must have follow-up sessions weekly to review the missing information status. Cox Alomar 2012, Inc. continues the efforts to complete the contributor's missing information.

C.

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

133 FOR LINE NUMBER: **PAGE** 62 OF Use separate schedule(s) (check only one) for each category of the 11a 11b 11c 11d Detailed Summary Page 12 13a 13b 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) COX ALOMAR 2012 INC Full Name (Last, First, Middle Initial) Viridiana Vazquez McLeary Date of Receipt Mailing Address Urb. Juan Ponce de Leon 10 2012 18 164 23th St. City State Zip Code Transaction ID: SA11AI.10448 PR 00969 Guaynabo FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation Receipt For: 2012 Election Cycle-to-Date Primary X General 375.00 Other (specify) Full Name (Last, First, Middle Initial) Juan M. Vidal Date of Receipt Mailing Address Urb. Baldrich 10 29 2012 211 Agustin Stahl St. City State Zip Code Transaction ID: SA11AI.10341 San Juan PR 00918 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 60.00 Name of Employer Occupation Retired Retired Receipt For: 2012 Election Cycle-to-Date Primary ✓ General 485.00 Other (specify)

| Full Name (Last, First, Middle Initial) Zulma A. Vilella Garcia | | Date of Receipt |
|--|-----------------------------|---|
| Mailing Address Urb. Torrimar Bambu St. City Guaynabo | L-4 State Zip Code PR 00966 | 10 18 2012 Transaction ID : SA11Al.10489 |
| FEC ID number of contributing federal political committee. Name of Employer | Occupation Homemaker | Amount of Each Receipt this Period |
| Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | _ |
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SUBTOTAL of Receipts This Page (optional).....

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

560.00

1mage# 13961071237 PAGE 63 / 133

: 97 'A = G7 9 @ 65 B9 CI G'H9 LH F9 @ 5 H98 'HC' 5 'F9 DC FHŽ G7 < 98 I @ 9 'C F' + H9 A = N 5 H + C B

Form/Schedule: SA11AI

Transaction ID : SA11AI.10448

When receiving a contribution, Fundraising Coordinators must provide Form-003 to the contributor. Form establishes that this candidacy is a federal campaign subject to compliance with the FECA and regulations of the FEC and the law requires us to register the personal information of our contributors. Form-003 requires: Name, Mailing Address, Phone Number, ID Number, if the person is US citizen or legal resident (Gren Card), occupation, employer, if self-employed, the name of the company, date and email. The staffer must revise the forms and complete a report for compliance staff within 24 hours after the contribution. Compliance staff must revise the report and return it to the Fundraising Coordinator with the findings on 24 hours. The fundraising staffer must correct the report by contacting the contributor by email, phone or mail asking for the missing information on 24 hours. If staffer is unable to contact the contributor, must contact the fundraising organizer and ask for other contact info of the contributor. The fundraising coordinator must make a second effort to contact the contributor by email, phone or mail and report the information within 7 days. Compliance division and fundraising division must have follow-up sessions weekly to review the missing information status. Cox Alomar 2012, Inc. continues the efforts to complete the contributor's missing information.

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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| | | Statements may not be sold or used by any pere name and address of any political committee | | | | | | | |
|---|--|--|------------------------------------|--|--|--|--|--|--|
| NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | | | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) Zulma A. Vilella Garcia | Date of Receipt | | | | | | | |
| | Mailing Address Urb. Torrimar L-4 | 10 27 2012 | | | | | | | |
| | Calle Bamboo Dr. | State Zip Code | Transaction ID : SA11AI.10335 | | | | | | |
| | Guaynabo | PR 00966 | . SATTAL 10333 | | | | | | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | | | | |
| | Name of Employer Unemployed | Occupation Homemaker | 200.00 | | | | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date 300.00 | | | | | | | |
| В. | Full Name (Last, First, Middle Initial) Rosa Villamil Durand | Date of Receipt | | | | | | | |
| | Mailing Address PO Box 11873 | 10 18 2012 | | | | | | | |
| | City San Juan | State Zip Code PR 00910 | Transaction ID : SA11AI.10456 | | | | | | |
| | FEC ID number of contributing federal political committee. | С | Amount of Each Receipt this Period | | | | | | |
| | Name of Employer | Occupation | 350.00 | | | | | | |
| | Unemployed | Retired | | | | | | | |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | | | | | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) John A. Waits | | Date of Receipt | | | | | | |
| C. | Mailing Address 6609 Persimmon Tree Rd. | 10 20 2012 | | | | | | | |
| | City Cabin John | State Zip Code MD 20818-1217 | Transaction ID : SA11AI.10519 | | | | | | |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period | | | | | | |
| | Name of Employer Winston Strawn | 250.00 | | | | | | | |
| | Receipt For: 2012 | | | | | | | | |
| | Primary X General Other (specify) | | | | | | | | |
| Г | UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number | | 800.00 | | | | | | |

FOR LINE NUMBER: **PAGE** 65 OF (check only one) 11a 11b 11d 11c

133 Use separate schedule(s) for each category of the ITEMIZED RECEIPTS **Detailed Summary Page** 12 13a 13b 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) **Paul Weiss** Date of Receipt Mailing Address 5343 32nd St.NW 10 2012 23 City State Zip Code Transaction ID: SA11AI.10365 DC 20015-1359 Washington FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation Prime Policy Group Director Receipt For: 2012 Election Cycle-to-Date X General Primary 1500.00 Other (specify) Full Name (Last, First, Middle Initial) Carmen Zorrilla Date of Receipt Mailing Address 592 Cesar Gonzalez 18 2012 Apt. 1312 City State Zip Code Transaction ID: SA11AI.10433 San Juan PR 00918 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Self-Employed Medical Doctor Receipt For: 2012 Election Cycle-to-Date ✓ General Primary 500.00 Other (specify) Full Name (Last, First, Middle Initial) Frank Zorrilla Date of Receipt Mailing Address P.O. Box 191783 2012 22 City State Zip Code Transaction ID: SA11AI.9875 PR San Juan 00919-1783 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Frank Zorilla Law Office Lawyer Receipt For: 2012 Election Cycle-to-Date General Primary 1850.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... 68225.22

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

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

PAGE 66 OF 133 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 11c 11a 11b 11d Detailed Summary Page 12 13a

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.

| $\left. \right\rangle$ | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | |
|------------------------|---|----------------------------|------------------------------------|
| Α. | Full Name (Last, First, Middle Initial) INDEPENDENT ACTION INC Mailing Address 46 40 43TH STREET NW | Date of Receipt | |
| | Mailing Address 16 19 13TH STREET, NW | 10 30 2012 | |
| | City WASHINGTON | State Zip Code DC 20009 | Transaction ID : SA11C.10288 |
| | FEC ID number of contributing federal political committee. | C C00139741 | Amount of Each Receipt this Period |
| | Name of Employer | Occupation | 1000.00 |
| | Receipt For: 2012 Primary General Other (specify) | Election Cycle-to-Date | |
| В. | Full Name (Last, First, Middle Initial) | | Date of Receipt |
| | Mailing Address | | M M / D D / Y Y Y Y |
| | City | State Zip Code | |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period |
| | Name of Employer | Occupation | |
| | Receipt For: Primary General Other (specify) | Election Cycle-to-Date | |
| C. | Full Name (Last, First, Middle Initial) | | Date of Receipt |
| ٠. | Mailing Address | Olate To O | M M / D D / Y Y Y Y |
| | City | State Zip Code | |
| | FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period |
| | Name of Employer | Occupation | |
| _ | Receipt For: Primary General Other (specify) | Election Cycle-to-Date | |
| s | UBTOTAL of Receipts This Page (optional) | | 1000.00 |
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SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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| not be sold or used by any person for the purpose of soliciting contributions | | | | | | | | | | | | |

| Any information copied from such Reports and St or for commercial purposes, other than using the | | |
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| NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | |
| Full Name (Last, First, Middle Initial) Center Tech Comm. Inc. Mailing Address PO Box 1253 City Cidra | State Zip Code PR 00739 | Date of Receipt 11 21 2012 Transaction ID : SA15.10818 |
| FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2012 Primary X General Other (specify) | Occupation Election Cycle-to-Date 400.00 | Amount of Each Receipt this Period 400.00 Radio Reimbursements |
| Full Name (Last, First, Middle Initial) 3. Mailing Address City | State Zip Code | Date of Receipt |
| FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) | Occupation Election Cycle-to-Date | Amount of Each Receipt this Period |
| Full Name (Last, First, Middle Initial) Address City | State Zip Code | Date of Receipt |
| FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) | Occupation Election Cycle-to-Date | Amount of Each Receipt this Period |
| SUBTOTAL of Receipts This Page (optional) | | 400.00 |

Bank Charges

Candidate Name

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

PAGE 68 133 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 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) Date of Disbursement Banco Popular de Puerto Rico 2012 Mailing Address P.O. Box 362708 10 30 City State Zip Code Amount of Each Disbursement this Period PR San Juan 00936-2708 Purpose of Disbursement 15.00 Bank Charges 001 Transaction ID: SB17.10711 Candidate Name Category/ Type Disbursement For: 2012 Office Sought: House ✓ General Senate Primary Other (specify) President District: State: Full Name (Last, First, Middle Initial) Banco Popular de Puerto Rico Date of Disbursement Mailing Address P.O. Box 362708 10 31 2012 City State Zip Code Amount of Each Disbursement this Period PR 00936-2708 San Juan 199.50 Purpose of Disbursement

Disbursement For: Office Sought: House 2012 X General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) c. Banco Popular de Puerto Rico Date of Disbursement Mailing Address P.O. Box 362708 2012 City State Zip Code Amount of Each Disbursement this Period 00936-2708 San Juan PR Purpose of Disbursement 227.24 BPPR Merchant DR MBS Fee 001 Transaction ID : SB17.10734 Candidate Name Category/ Type Office Sought: House Disbursement For: 2012 X General Senate Primary President Other (specify) State: District: 441.74

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

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

001

Category/ Type Transaction ID: SB17.10725

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | FOR LINE | | PAGE | 69 | OF | 133 | | |
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| Use separate schedule(s) for each category of the Detailed Summary Page | (check on | ly one) | | | | | | |
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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) Date of Disbursement Banco Popular de Puerto Rico 2012 Mailing Address P.O. Box 362708 01 City State Zip Code Amount of Each Disbursement this Period PR 00936-2708 San Juan Purpose of Disbursement 148.70 BPPR Merchant DR MBS Fee 001 Transaction ID: SB17.10735 Candidate Name Category/ Type Disbursement For: 2012 Office Sought: House ✓ General Senate Primary Other (specify) President District: State: Full Name (Last, First, Middle Initial) Banco Popular de Puerto Rico Date of Disbursement Mailing Address P.O. Box 362708 05 2012 11 City State Zip Code Amount of Each Disbursement this Period PR 00936-2708 San Juan 6.95 Purpose of Disbursement American Express Collection 001 Transaction ID: SB17.10759 Candidate Name Category/ Type Disbursement For: Office Sought: House 2012 Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) c. Banco Popular de Puerto Rico Date of Disbursement Mailing Address P.O. Box 362708 06 2012 City State Zip Code Amount of Each Disbursement this Period 00936-2708 San Juan PR Purpose of Disbursement 15.00 American Express Collection 001 Transaction ID : SB17.10835 Candidate Name Category/ Type Office Sought: Disbursement For: 2012 House X General Senate Primary President Other (specify) State: District: 170.65 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | FOR LINE NUMBE | F | PAGE | 70 | OF | 133 | |
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| Use separate schedule(s) for each category of the Detailed Summary Page | (check only one) | | | | | | |
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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) Date of Disbursement Luis Calderon Navarro 2012 Mailing Address PO Box 315 10 18 City State Zip Code Amount of Each Disbursement this Period PR Loiza 00772 Purpose of Disbursement 2170.00 Transportation-Gas for campaign vehicles expenses; Meals expenses for 007 Transaction ID: SB17.10693 campaign activitie Candidate Name Category/ Type Disbursement For: 2012 Office Sought: House ✓ General Senate Primary Other (specify) President District: State: Full Name (Last, First, Middle Initial) Luis Calderon Navarro Date of Disbursement Mailing Address PO Box 315 10 22 2012 City State Zip Code Amount of Each Disbursement this Period PR Loiza 00772 Purpose of Disbursement 3940.00 Transportation-Gas for campaign vehicles expenses; Meals expenses for 007 Transaction ID: SB17.10697 campaign activities Candidate Name Category/ Type Disbursement For: Office Sought: House 2012 Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Luis Calderon Navarro Mailing Address PO Box 315 10 30 2012 City Zip Code State Amount of Each Disbursement this Period Loiza PR 00772 680.00 Purpose of Disbursement Transportation-Gas for campaign vehicles expenses; Meals expenses for 007 campaign activities Transaction ID : SB17.10712 Candidate Name Category/ Type Office Sought: Disbursement For: 2012 House X General Senate Primary President Other (specify) State: District: 6790.00 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

1mage# 13961071245 PAGE 71 / 133

: 97 'A = G7 9 @ G5 B9 CI G'H9 LH F9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H= C B

Form/Schedule: SB17

Transaction ID: SB17.10693

Meals and gas expenses for campaign activities, disbursements under \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.10697

Meals and gas expenses for campaign activities, disbursements under \$200 aggregated to the original vendor.

1mage# 13961071246 PAGE 72 / 133

: 97 'A = G7 9 @ G B9 CI G'H9 LH F 9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F '+ H9 A = N5 H= C B

Form/Schedule: SB17

Transaction ID : SB17.10712

Meals and gas expenses for campaign activities, disbursements under \$200 aggregated to the original vendor.

SCHEDULE B (FEC Form 3)

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| ay not be sold or used by any person for the purpose of soliciting contributions ddress of any political committee to solicit contributions from such committee. | | | | | | | | | |
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| \ | ME OF COMMITTEE (In Full) OX ALOMAR 2012 INC | | | | | | | | | | | | |
| 4. Lu | Name (Last, First, Middle Initial) JUIS Calderon Navarro Illing Address PO Box 315 | Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | | | | | | | | |
| City Loiz Pur | | Zip Code 00772 | | Amou | nt of Ea | ch Disburse | ement this P | - | | | | | |
| Tra | ansportation-Gas for campaign vehicles expenses; Meals magical activities addidate Name | expenses for | 007 Category/ Type | Transac | ction ID | : SB17.107 | 31 | | | | | | |
| Offi | ce Sought: House Disbursement For Senate Primary President Other (s | , , , , , , , , , , , , , , , , , , , | | | | | | | | | | | |
| 3. Lu | Name (Last, First, Middle Initial) uis Calderon Navarro iling Address PO Box 315 | Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | | | | | | | | |
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| Full C. LU | Name (Last, First, Middle Initial) uis Calderon Navarro iling Address PO Box 315 | | | Date | M / I | ursement | y y y y 2012 | Y | | | | | |
| Car | | | . , | ch Disburse | 422. | | | | | | | | |
| Sta | Senate Primary President Other (s | General specify) | | | | | | | | | | | |
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1mage# 13961071248 PAGE 74 / 133

: 97 'A = G7 9 @ G5 B9 CI G'H9 LH F9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H= C B

Form/Schedule: SB17 Transaction ID: SB17.10731

Meals and gas expenses for campaign activities, disbursements under \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: \$B17.10742

Meals and gas expenses for campaign activities, disbursements under \$200 aggregated to the original vendor.

1mage# 13961071249 PAGE 75 / 133

: 97 A = G7 9 @ G5 B9 CI G'H9 LH F 9 @ 5 H9 8 'HC '5 F 9 DC F HZ G7 < 98 I @ 'C F '+ H9 A = N 5 H= C B

Form/Schedule: SB17

Transaction ID: SB17.10745

Original vendor: Sheraton Hotel & Resorts, 200 Convention Boulevard San Juan, Puerto Rico 00907. Amount: \$211.25 Purpose: Hotel Room for campaign team activity. Date: Nov/02/2012 Other disbursements under \$200 aggregated to the original vendor.

Form/Schedule: Transaction ID:

| ım | nage# 13961071250 | | | | | |
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| | | | | | | person for the purpose of soliciting contributions e to solicit contributions from such committee. |
| \rangle | NAME OF COMMI | , , | | , | | |
| | Full Name (Last, Fi | | | | | |
| Luis Calderon Navarro | | | | | | Date of Disbursement |
| | Mailing Address P | O Box 315 | | | | 11 02 2012 |
| | City | | State | Zip Code | | Amount of Each Disbursement this Period |
| | Loiza | | PR | 00772 | | 200.00 |
| | Purpose of Disburs Meals for campaig | | | | 007 | 200.00 Transaction ID : SB17.10746 |
| | Candidate Name | | | | Category/ Type | Transaction is . OST7.10740 |
| | Office Sought: | House Senate President District: | Disbursement For Primary Other (s | X General | | |
| | Full Name (Last, Fi | | | | | |
| 3. | Luis Caldero Mailing Address P | n Navarro | | | | Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | | State | Zip Code | | Amount of Each Disbursement this Period |
| | Loiza | | PR | 00772 | | |
| | Purpose of Disburs Transportation-Ga | s for campaign vehic | cles expenses; Meals | expenses for | 007 | 680.00 Transaction ID : SB17.10753 |
| | Candidate Name | | | | Category/ Type | Transaction is . 35 Tr. 10733 |
| | Office Sought: | House Senate President | Disbursement For Primary Other (s | X General | | |
| | | District: | | | | |
| Э. | Full Name (Last, Fi | | | | | Date of Disbursement |
| | Mailing Address P | O Box 315 | | | | 11 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
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| | Loiza | | PR 0 | 0772 | | 2.1.2.1.2.1.2.1.2.1.2.1.1.1.1.1.1.1.1.1 |
| Purpose of Disbursement Transportation-Gas for campaign vehicles expenses; Meals expenses for campaign activity on Nov. 5 | | | | | | 680.00 Transaction ID : SB17.10754 |
| | Candidate Name | | | | Category/ Type | |
| | Office Sought: | House Senate | Disbursement For Primary | : 2012 General | | |

Other (specify)

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

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State:

FE5AN018

President

District:

1560.00

1mage# 13961071251 PAGE 77 / 133

: 97 'A = G7 9 @ G5 B9 CI G'H9 LH F9 @ 5 H9 8 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A + N5 H+ C B

Form/Schedule: SB17

Transaction ID : SB17.10746

Meals for campaign team on campaign activity. Disbursements under \$200 agregated to original vendor.

Form/Schedule: SB17

Transaction ID: SB17.10753

Meals and gas expenses for campaign activities, disbursements under \$200 aggregated to the original vendor.

1mage# 13961071252 PAGE 78 / 133

: 97 'A = G7 9 @ G B9 CI G'H9 LH F 9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F '+ H9 A = N5 H= C B

Form/Schedule: SB17

Transaction ID : SB17.10754

Meals and gas expenses for campaign activities, disbursements under \$200 aggregated to the original vendor.

Form/Schedule: Transaction ID:

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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| | y information copied from such Reports and Statements may not be sold or us for commercial purposes, other than using the name and address of any politic | | son for the purpose of soliciting contributions |
| \rangle | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | |
| ۹. | Full Name (Last, First, Middle Initial) Central 12 Mailing Address Centro Intl de Mercadeo Torre 1 | | Date of Disbursement 10 24 2012 |
| | Suite 406 City State Zip Code | | Amount of Each Disbursement this Period |
| | Guaynabo PR 00968 Purpose of Disbursement Campaign Advertising | 004 | 14450.00 Transaction ID : SB17.10703 |
| | Candidate Name | Category/ Type | Transaction ib . 3617.10703 |
| | Office Sought: House | | |
| 3. | Full Name (Last, First, Middle Initial) Central 12 | | Date of Disbursement |
| | Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406 City State Zip Code | | 10 25 2012 |
| | City State Zip Code Guaynabo PR 00968 Purpose of Disbursement | | Amount of Each Disbursement this Period |
| | Candidate Name | 004 Category/ Type | Transaction ID : SB17.10704 |
| | Office Sought: House | | |
| Э. | Full Name (Last, First, Middle Initial) Central 12 | | Date of Disbursement |
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| | City State Zip Code Guaynabo PR 00968 Purpose of Disbursement | | Amount of Each Disbursement this Period 35500.00 |
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| Senate Primary General President Other (specify) | | Candidate Name | | | | 11a11SdCt1011 ID . 3D17.10700 |
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SCHEDULE B (FEC F ITEMIZED DISBURSE

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| | | (FEC Form SBURSEMEN | - | Use separate so for each categor Detailed Summa | y of the | FOR LINE NUMBER: PAGE 81 OF 133 (check only one) X 17 |
| | | | | | | person for the purpose of soliciting contributions e to solicit contributions from such committee. |
| NAM | IE OF COMM | IITTEE (In Full) AR 2012 INC | | , | | |
| A. Ce | entral 12 | First, Middle Initial) | | | | Date of Disbursement |
| City Guay Purpo Adv | · · | House | State PR Disbursement For: | | 004 Category/ Type | Amount of Each Disbursement this Period 1540.00 Transaction ID: SB17.10761 |
| State | | Senate President District: | Primary Other (sp | General pecify) | | |
| B. Fra | ancisco C | First, Middle Initial) Chevere Mourir P.O. Box 364225 | 00 | | | Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Purpo In-k | didate Name | rsement sing Expenses-Meals House Senate President District: | State PR Disbursement For: Primary Other (sp | X General | Category/ Type | Amount of Each Disbursement this Period 217.16 Transaction ID : SB17.10368 |
| Full 1 | | First, Middle Initial) | | | | Date of Disbursement |

Mailing Address PO Box 443

House Senate

c. Jose Cruz

Office Sought:

City State Zip Code PR 00777 Juncos Purpose of Disbursement Salary 001 Candidate Name Category/ Type

Disbursement For: 2012

Primary

Amount of Each Disbursement this Period 1860.00

2012

Transaction ID: SB17.10719

10

| State: | President District: | Other (specify) | | | | | | | | | | |
|-----------------|-----------------------------|-----------------|---|--------------|---|---|---|--------------|---|-----|------|---|
| SUBTOTAL of D | Disbursements This Page | (optional) | _ | - | | _ | _ | - | _ | 361 | 7.16 | 3 |
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✓ General

| ım | nage# 13961071256 | | | |
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| | ny information copied from such Reports and Statements of for commercial purposes, other than using the name and | | | |
| <u>ÿ:</u> | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | address of any point | | o to conon continuations were continuated. |
| | Full Name (Last, First, Middle Initial) | | | |
| ۹. | Cumbre 1470 | | | Date of Disbursement |
| | Mailing Address Apartado 1210 | | | 10 29 2012 |
| | City State | Zip Code | | Amount of Each Disbursement this Period |
| | <u>Orocovis</u> PR | 00720 | | |
| | Purpose of Disbursement Radio Ads. | | 004 | 640.00 |
| | Candidate Name | | Category/ Type | Transaction ID : SB17.10844 |
| | | | 71. | |
| _ | State: District: Full Name (Last, First, Middle Initial) | | | + |
| 3. | Ivelisse De Jesus Mailing Address PO Box 367921 | | | Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City State | Zip Code | | Amount of Each Disbursement this Period |
| | San Juan PR | 00936-7921 | | Amount of Each disbursement this Feriod |
| | Purpose of Disbursement Fundraising Expenses-Beverages | | 003 | 448.97 Transaction ID : SB17.10722 |
| | Candidate Name | | Category/ Type | |
| | Office Sought: House Senate President Primary Other | - | | |
| | Full Name (Last, First, Middle Initial) | | | |
| Э. | Ivelisse De Jesus | | | Date of Disbursement |
| | Mailing Address PO Box 367921 | | | 10 31 7 2012 |
| | | Zip Code | | Amount of Each Disbursement this Period |
| | Purpose of Disbursement | 00936-7921 | | 500.00 |
| | Meals and gas expenses Candidate Name | | 002 Category/ Type | Transaction ID : SB17.10721 |
| | Office Sought: House Disbursement For Senate President Other | | .,,pc | |

State:

District:

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

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

1588.97

1mage# 13961071257 PAGE 83 / 133

: 97 A = G7 9 @ G B 9 C I G H 9 L H F 9 @ 5 H 9 8 H C 5 F 9 D C F H Z G7 < 98 I @ C F H 9 A = N 5 H C B

Form/Schedule: SB17

Transaction ID : SB17.10722

Reimbursement of fundraiser expenses. Original vendors: Costo Wholesales, 1185 65th Infantry Ave. San Juan, Bairoa Ward, Puerto Rico 00924. Amount: \$204.47 for beverages. Date: 10/27/2012. Sams Club, 6543 Plaza Escorial Bo. San Anton Carr. 3 Carolina, Puerto Rico 00987. Amount: 244.50. Date: 10/27/2012 for meals and beverages.

Form/Schedule: SB17 Transaction ID: SB17.10721

Monthly reimbursement of meals and gas expenses made by Mrs. De Jesus for assisting on fundraisers and campaign activities. No disbursements over \$200 aggregated to original vendor.

S

| Image# 13961071258 | | | |
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| SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS | Use separate sch for each category Detailed Summar | y of the | FOR LINE NUMBER: PAGE 84 OF 133 (check only one) X 17 |
| Any information copied from such Reports and Statements or for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | | person for the purpose of soliciting contributions |
| Full Name (Last, First, Middle Initial) A. Ivelisse De Jesus Mailing Address PO Box 367921 | | | Date of Disbursement 11 15 2012 |
| City State San Juan PR Purpose of Disbursement Meals and gas expenses Candidate Name | Zip Code 00936-7921 | 001 Category/ Type | Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.10849 |
| State: District: | | туре | |
| Full Name (Last, First, Middle Initial) Carl Gibbs Acosta Mailing Address Cape Village B-4 Buzon 110 | | | Date of Disbursement 10 |
| City State Carolina PR Purpose of Disbursement Salary Candidate Name | Zip Code 00979 | 001 Category/ | Amount of Each Disbursement this Period 1860.00 Transaction ID: SB17.10730 |
| Office Sought: House Disbursement F | | Туре | |
| Full Name (Last, First, Middle Initial) C. Richard Guzman Rivera Mailing Address 112 Paris St. | | Date of Disbursement M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 | |
| Urb. Floral Park City State Hato Rey PR Purpose of Disbursement | | Amount of Each Disbursement this Period 1200.00 | |
| Candidate Name | | Category/ | Transaction ID : SB17.10833 |

Type

Office Sought:

State:

House

Senate

District:

President

Disbursement For: 2012

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

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

Primary

Other (specify)

General

3560.00

1mage# 13961071259 PAGE 85 / 133

: 97 'A = G7 9 @ G5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DC FHŽG7 < 98 I @ 'C F' + H9 A + N5 H+ C B

Form/Schedule: SB17

Transaction ID: SB17.10849

Monthly reimbursement of meals and gas expenses made by Mrs. De Jesus for assisting on fundraisers and campaign activities. No disbursements over \$200 aggregated to original vendor.

Form/Schedule: SB17 Transaction ID: SB17.10833

The campaign rented a car owned by Mr. Guzman for campaigns political events around the Island. Mrs. Guzman charges \$300 per activity for the rental. This disbursements pays for the four activities car rental.

S

| ln | nage# 13961071260 | | | | | | | | | | | |
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| | ny information copied from such Reports and Statements for commercial purposes, other than using the name at NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | | | or th | | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) Richard Guzman Rivera | | | | ate o | of Disb | urse | | Y | YIY | Υ | |
| | Mailing Address 112 Paris St. Urb. Floral Park | | | L | 11 | | 02 | 2 | <u>L</u> . | 2012 | | |
| | City State Hato Rey PR | | Aı | moui | nt of E | ach | Disbu | rseme | - | _ | | |
| | Purpose of Disbursement Vehicle Rental Candidate Name | | 007 | Trai | nsac | tion ID |) : S | B17.10 | 755 | 500 | 0.00 | _ |
| | Office Sought: House Disbursement I Senate Prima | | Category Type | / | | | | | | | | |
| В. | Full Name (Last, First, Middle Initial) Miguel Hernandez Agosto Mailing Address Apartado 367746 | | | | | of Disb | urse 3 | D / | Υ | y y 2012 | Υ | |
| | CityStateSan JuanPR | Zip Code 00936-7746 | | Aı | moui | nt of E | ach | Disbu | rseme | nt this | Peri | iod |
| | Purpose of Disbursement Salary Candidate Name | | 001 Category | | nsac | tion ID |) : S | B17.10 | 0839 | 4650 | 0.00 | |
| | Office Sought: House Senate President State: Disbursement I Prima Other | | Туре | | | | | | | | | |
| C. | Full Name (Last, First, Middle Initial) Gabriel Laborde Mailing Address Urb. Rio Piedras Heights Tinto Street 1679 | | | | ate o | | D | ement | | ү ү 2012 | Υ | |
| | City State San Juan PR | | Aı | moui | nt of E | ach | Disbu | rseme | nt this | Peri | iod | |
| | Purpose of Disbursement Meals and gas expenses | 00926 | 001 | 7 [| _ | | | | , | 25 | 0.00 | |
| | Candidate Name | Category Type | | Transaction ID : SB17.10756 | | | | | | | | |

Office Sought:

State:

House

Senate

District:

President

Disbursement For: 2012

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

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

Primary

Other (specify)

General

5400.00

1mage# 13961071261 PAGE 87 / 133

: 97 A = G7 9 @ G5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHZ'G7 < 98 I @ 'CF' ≠ H9 A = N5 H= CB

Form/Schedule: SB17

Transaction ID: SB17.10755

The campaign rented a car owned by Mr. Guzman for campaigns political events around the Island. Mrs. Guzman charges \$300 per activity for the rental. This disbursements pays for one (credit to past-due invoic of \$200) activities

car rental.

Form/Schedule: SB17

Transaction ID: SB17.10756

Monthly reimbursement of meals and gas expenses made by Mr. Laborde for assisting campaign activities. No disbursements over \$200 aggregated to original vendor.

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| Image# 13961071262 | | |
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| SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 88 OF 133 (check only one) X 17 |
| Any information copied from such Reports and Statements n or for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | |
| Full Name (Last, First, Middle Initial) A. Javier J Lamboy Hernandez Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2 | | 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 San Juan PR Purpose of Disbursement Salary Candidate Name Office Sought: House Disbursement For Senate Primary President Other (s | General | Amount of Each Disbursement this Period 3022.50 Transaction ID: SB17.10717 |
| Full Name (Last, First, Middle Initial) Javier J Lamboy Hernandez Mailing Address Carmen St. # 5 | General | Date of Disbursement M M M / D D / Y Y Y Y Y Amount of Each Disbursement this Period 614.17 Transaction ID: SB17.10841 |

| | ruii Nairie (Last, First, Middle Iriitiai) |
|---|--|
| _ | Israel Morales Alicea |

District:

Stael Morales Alicea Mailing Address Terranova 4B9 St. City Zip Code State PR 00969 Guaynabo Purpose of Disbursement Salary 001 Candidate Name Category/ Type Office Sought: House Disbursement For: 2012 X General Senate Primary President Other (specify)

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

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

Date of Disbursement

10

2012

Amount of Each Disbursement this Period

1860.00

Transaction ID : SB17.10764

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State:

Image# 13961071263 PAGE 89 / 133

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ H98 'HC' 5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: SB17

Transaction ID : SB17.10841

Reimbursement of meal and gas expenses made by Mr. Lamboy on campaign duties such as, attending to meetings and fundraising activitites. Disbursements over \$200 aggregated: Original vendor: Shell Baldrich, Coll y Toste St. Hato Rey, Puerto Rico 00918 Amount: \$22.41 made on 10/24/2012, \$25.76 on 09/13/2012 and \$7.52 on 09/06/2012. Purpose: Gas and meals expenses. Other disbursements under \$200 aggregated to the original vendor.

Form/Schedule: Transaction ID:

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | FOR LINE | NUMBE | | PAGE | 90 | OF | 133 | | | |
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| \rangle | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | | | | | | |
| ۸. | Full Name (Last, First, Middle Initial) Ernesto Morales Ramos Mailing Address 2 Cond. San Francisco | | | Date | M / | ursement | 2012 | Y |
| | VLG Apt. 109 City State Zip Code | | | | | | | Davis d |
| | Carolina PR 00987-6950 Purpose of Disbursement Salary | 001 | 1 | Ľ | - , | : SB17.10 | sement this F | |
| | Candidate Name | Category/ Type | | ansa | iction iD | : 3617.10 | 121 | |
| | Office Sought: House Senate President Disbursement For: 2012 Primary Other (specify) State: District: | | | | | | | |
| 3. | Full Name (Last, First, Middle Initial) One Link Communications | | | М | M / | ursement | YYY | Y |
| | Mailing Address PO Box 192296 City State Zip Code | | | 1 Amo | | 01 ach Disburs | 2012 sement this F | Period |
| | San Juan PR 00919-2296 Purpose of Disbursement Office Rentals-Internet and Phones | 001 | 1 | | | : SB17.10 | 262 | - |
| | Candidate Name | Category/ Type | | uoc | | . 020 | | |
| | Office Sought: House Senate President Disbursement For: 2012 Primary Other (specify) State: | | | | | | | |
| Э. | Full Name (Last, First, Middle Initial) Ivonne Otero Santiago | | | Date | of Disb | ursement | | |
| | Mailing Address Calle 2 #77 Urb. Paseo Alto | | | м 1 | M / | 31 | 2012 | Υ |
| | City State Zip Code San Juan PR 00926 Purpose of Disbursement Salary | -04 | 1 | Amo | unt of Ea | ach Disbur | sement this F | |
| | Candidate Name | O01 Category/ Type | | ansa | ction ID | : SB17.107 | '28 | |
| | Office Sought: House Senate President Disbursement For: 2012 Primary Other (specify) State: | | | | | | | |
| s | UBTOTAL of Disbursements This Page (optional) | | | | | | 5285 | .03 |
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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | FOR LINE N | UMBER: | PAGE | 91 | OF | 133 | | | | |
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| ay not be sold or used by any person for the purpose of soliciting contributions | | | | | | | | | | |

Any information copied from such Reports and Statements may not be sold or used by any 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) Date of Disbursement Panaderia y Reposteria Las Americas 2012 Mailing Address Calle Paris Esquina Calle America 10 23 Urb. Floral Park City State Zip Code Amount of Each Disbursement this Period PR Hato Rey 00917 Purpose of Disbursement 500.00 Fundraising Expenses-Rental 003 Transaction ID: SB17.10709 Candidate Name Category/ Type Disbursement For: 2012 Office Sought: House |X General Senate Primary Other (specify) President District: State: Full Name (Last, First, Middle Initial) Panaderia y Reposteria Las Americas Date of Disbursement Mailing Address Calle Paris Esquina Calle America 10 2012 Urb. Floral Park City State Zip Code Amount of Each Disbursement this Period PR 00917 Hato Rey 453.97 Purpose of Disbursement Fundraisng Expenses-Meals 003 Transaction ID: SB17.10710 Candidate Name Category/ Type Disbursement For: Office Sought: 2012 House X General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Panaderia y Reposteria Las Americas Mailing Address Calle Paris Esquina Calle America 10 28 2012 Urb. Floral Park City Zip Code State Amount of Each Disbursement this Period 00917 Hato Rey PR Purpose of Disbursement 500.00 Fundraising Expenses-Rental 003 Transaction ID : SB17.10707 Candidate Name Category/ Type Office Sought: Disbursement For: 2012 House X General Senate Primary President Other (specify) State: District: 1453.97 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | FOR LINE | PA | ΙGΕ | 92 | OF | 133 | | |
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| for each category of the Detailed Summary Page | X | 17 | 1 | 8 | | 19a | | 19b |
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1mage# 13961071267 PAGE 93 / 133

: 97 'A = G7 9 @ G5 B9 CI G'H9 LH F9 @ 5 H9 8 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A + N5 H+ C B

Form/Schedule: SB17

Transaction ID: SB17.10762

Mr. Berrios is owner of a Motor-Homes rented by Cox Alomar 2012, Inc. for the Campaign Closing Activity.

Form/Schedule: Transaction ID:

SCHEDULE B (FEC Form 3) ITEMIZED DISRUBSEMENTS

| | FOR LIN | JF | NUMBE | R· | | PA | GE | 94 | OF | 133 |
|--|----------|----|-------|----|-----------|----|----|------------|----|-----------|
| Use separate schedule(s) for each category of the Detailed Summary Page | (check o | | | | 18 20b | | | 19a 20c | | 19b 21 |
| ay not be sold or used by any person for the purpose of soliciting contributions ddress of any political committee to solicit contributions from such committee. | | | | | | | | | | |
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| TEMIZED DISBURSEMENTS | Detailed Summar | | 17 |
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| Any information copied from such Reports and Statements r or for commercial purposes, other than using the name and | | | erson for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | | |
| Full Name (Last, First, Middle Initial) A. Restaurante Antonio Mailing Address, 1406 Magdalana Ava | | | Date of Disbursement 10 18 2012 |
| Mailing Address 1406 Magdalena Ave. | 7. ^ : | | |
| City State San Juan PR | Zip Code 00907 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement Fundraising Expenses-Meals and Beverages | | 003 | 1376.40 Transaction ID : SB17.10696 |
| Candidate Name | | Category/ Type | |
| Office Sought: House Senate Primary President Other (: | General | | |
| Full Name (Last, First, Middle Initial) A. Miguel Rios | | | Date of Disbursement |
| Mailing Address Valle Verde II Ap-1 Rio Maravilla Street | | | 10 / D D / Y Y Y Y Y 2012 |
| City State Bayamon PR | Zip Code 00961 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement Music Vehicle Rental | | 007 | 2600.00 Transaction ID : SB17.10718 |
| Candidate Name | | Category/ Type | |
| Office Sought: House Senate President State: Disbursement Fo Other (s | | | |
| Full Name (Last, First, Middle Initial) | | | Date of Disbursement |
| - | | | — M M / D D / Y Y Y Y |
| Mailing Address Valle Verde II Ap-1 Rio Maravilla Street | | | 11 022012 |
| City State Z | ip Code | | Amount of Each Disbursement this Period |
| Bayamon PR (Purpose of Disbursement Sound Vehicle Rental | 00961 | 007 | 1000.00 |
| Candidate Name | | Category/ Type | Transaction ID : SB17.10752 |
| Office Sought: House Senate President State: Disbursement Fo Other (s | General | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 4976.40 |
| TOTAL This Period (last page this line number only) | | | |

1mage# 13961071269 PAGE 95 / 133

: 97 A = G7 9 @ G5 B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H= C B

Form/Schedule: SB17

Transaction ID: SB17.10718

The campaign rented a sound car owned by Mr. Rios for campaigns political events around the Island. Mrs. Rios charges \$650 per activity for the rental. This disbursements pays for four activities sound car rental.

Form/Schedule: SB17 Transaction ID: SB17.10752

The campaign rented a sound car owned by Mr. Rios for campaigns political events around the Island. Mrs. Rios charges \$650 per activity for the rental. This disbursements pays for one activity (credit of \$350 on invoices past-due) sound car rental.

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | FOR LINE | NUMBE | R: | | PAG | iE 9 | 96 | OF | 133 |
|--|------------|-----------|-----|-------|----------|-------|------|-------|-----|
| Use separate schedule(s) | (check on | | | | | | | | |
| for each category of the Detailed Summary Page | X | 17 | | 18 | | 198 | a | | 19b |
| Detailed Summary Page | | 20a | | 20b | | 200 | С | | 21 |
| ay not be sold or used by any | person for | the purpo | ose | of so | olicitir | ng co | ontr | ibuti | ons |

Any information copied from such Reports and Statements ma 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) Carmen Angeles Rodriguez Weber Date of Disbursement 2012 Mailing Address Cond. Torre de los Frailes 10 31 Apt. 11 J City State Zip Code Amount of Each Disbursement this Period PR Guaynabo 00969 Purpose of Disbursement 1860.00 Salary 001 Transaction ID: SB17.10729 Candidate Name Category/ Type Disbursement For: 2012 Office Sought: House Senate Primary ✓ General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Carmen Angeles Rodriguez Weber Date of Disbursement Mailing Address Cond. Torre de los Frailes 10 31 2012 Apt. 11 J City State Zip Code Amount of Each Disbursement this Period PR 00969 Guaynabo 260.00 Purpose of Disbursement Gas expenses 001 Transaction ID: SB17.10732 Candidate Name Category/ Type Disbursement For: Office Sought: 2012 House X General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Christopher Sanchez Ortiz Mailing Address PO Box 194555 10 2012 24 City Zip Code State Amount of Each Disbursement this Period 00919 San Juan PR Purpose of Disbursement 100.00 Travel Expenses-Gas 002 Transaction ID : SB17.10705 Candidate Name Category/ Type Office Sought: Disbursement For: 2012 House X General Primary Senate President Other (specify) State: District: 2220.00 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

1mage# 13961071271 PAGE 97 / 133

: 97 A = G7 9 @ G5 B9 CI G'H9 LH F9 @ 5 H98 'HC '5 F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H= C B

Form/Schedule: SB17

Transaction ID : SB17.10732

Reimbursement of gas expenses made by Mrs. Rodriguez assisting on campaign activities as Fundraiser Coordinator. Disbursements under \$200 agregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.10705

Advance for gas expenses for campaign vehicle, disbursements under \$200 aggregated to the original vendor.

SCHEDULE B (FEC Form 3)

| | FOR LINE | NUMBE | R: | | PAGE | 98 | OF | 133 | | | |
|---|-----------|---------|----|-----|------|-----|----|-----|--|--|--|
| Use separate schedule(s) | (check on | ly one) | | | | | | | | | |
| for each category of the Detailed Summary Page | X | 17 | | 18 | | 19a | | 19b | | | |
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| ay not be sold or used by any person for the purpose of soliciting contributions address of any political committee to solicit contributions from such committee. | | | | | | | | | | | |
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| T | EMIZED DISBURSEMENTS | for each categor Detailed Summa | | X 17 18 19a 19b 20a 20b 20c 21 |
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| | y information copied from such Reports and Statements m for commercial purposes, other than using the name and a | | | |
| \rangle | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | | |
| ۹. | Full Name (Last, First, Middle Initial) Christopher Sanchez Ortiz Mailing Address PO Box 194555 | | | Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City State San Juan PR Purpose of Disbursement Meals and gas expenses Candidate Name Office Sought: House Disbursement For: Senate Primary President Other (s | X General | 001 Category/ Type | Amount of Each Disbursement this Period 1126.57 Transaction ID: SB17.10736 |
| 3. | Full Name (Last, First, Middle Initial) Christopher Sanchez Ortiz Mailing Address PO Box 194555 City State San Juan PR Purpose of Disbursement | Zip Code 00919 | | Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | Gås Expenses Candidate Name Office Sought: House Disbursement Formary President Primary Other (s | General | Category/ Type | Transaction ID : SB17.10739 |
| Э. | Full Name (Last, First, Middle Initial) Christopher Sanchez Ortiz Mailing Address PO Box 194555 | | | Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | • | X General | 001 Category/ Type | Amount of Each Disbursement this Period 1627.50 Transaction ID: SB17.10741 |
| s | UBTOTAL of Disbursements This Page (optional) | | | 3254.07 |
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Image# 13961071273 PAGE 99 / 133

: 97 'A = G7 9 @ G5 B9 C1 G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHZ'G7 < 981 @ 'CF' + H9 A → N5 H+CB

Form/Schedule: SB17

Transaction ID : SB17.10736

Monthly reimbursement to Mr. Sanchez for gas and meals expenses made on campaign activities. Mr. Sanchez was Mr. Cox assistant. Original vendor: Autoexpreso, Suite 106, 1st Floor, Metro Office Bldg. Office 3 1st. St., Guaynabo, Puerto Rico 00968. Purpose: toll charges. Amounts and dates: \$80 on 08/12/2012; \$30 on 7/3/20120; \$60 on 05/30/2012; \$20 on 08/05/2012; \$30 on 07/27/2012; \$30 on 7/02/2012. Other disbursements under \$200 aggregated to the original vendor.

Form/Schedule: SB17 Transaction ID: SB17.10739

Advance for campaign vehicle gas expenses. Disbursements under \$200 aggregate to the original vendor.

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | FOR LINE | NUMBER | ı | PAGE | 100 O | F | 133 | | | |
|-------------------------------|------------------|------------------|-----|---------|---------|----------|------|-----|--|--|
| Use separate schedule(s) | | (check only one) | | | | | | | | |
| for each category of the | $ $ $ $ \times | 17 | | 18 | | 19a | | 19b | | |
| Detailed Summary Page | | 20a | | 20b | | 20c | | 21 | | |
| ay not be sold or used by any | person for | the purpo | ose | of soli | iciting | contribu | utio | ns | | |

Any information copied from such Reports and Statements ma 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) Date of Disbursement Christopher Sanchez Ortiz 2012 Mailing Address PO Box 194555 15 Zip Code City State Amount of Each Disbursement this Period PR San Juan 00919 Purpose of Disbursement 2842.15 Meals and gas expenses 001 Transaction ID: SB17.10848 Candidate Name Category/ Type Disbursement For: 2012 Office Sought: House Senate Primary ✓ General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Maria L. Santaella Arguinzoni Date of Disbursement Mailing Address PO Box 366676 10 23 2012 City State Zip Code Amount of Each Disbursement this Period PR 00936 San Juan 268.71 Purpose of Disbursement In-kind - Fundraising decoration expenses Transaction ID: SB17.10593 Candidate Name Category/ Type Disbursement For: Office Sought: House 2012 Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Maria L. Santaella Arguinzoni Mailing Address PO Box 366676 10 2012 24 City State Zip Code Amount of Each Disbursement this Period 00936 San Juan PR 399.60 Purpose of Disbursement In-kind - Fundraising Rentals-chairs and tables Transaction ID : SB17.10594 Candidate Name Category/ Type Office Sought: Disbursement For: 2012 House X General Primary Senate President Other (specify) State: District: 3510.46 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

1mage# 13961071275 PAGE 101 / 133

: 97 A = G7 9 @ G5 B9 CI G'H9 LHF9 @ 5 H98 'HC' 5 F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: SB17

Transaction ID : SB17.10848

Monthly reimbursement to Mr. Sanchez for gas and meals expenses made on campaign activities. Mr. Sanchez was Mr. Cox assistant. Original vendor: Autoexpreso, Suite 106, 1st Floor, Metro Office Bldg. Office 3 1st. St., Guaynabo, Puerto Rico 00968. Purpose: toll charges. Amounts and dates: \$20 on 8/29/2012; \$30 on 08/12/2012; \$100 on 08/06/2012; \$100 on 10/12/2012. Other disbursements under \$200 aggregated to the original vendor.

Form/Schedule: Transaction ID:

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| or for commerc | n copied from such Reportial purposes, other than used | | | | | r the purp | ose of so | oliciting contribu | utions | | | |
| | OMAR 2012 INC | | | | | | | | | | | |
| | ast, First, Middle Initial) Santaella Arguinz | | | Date of Disbursement | | | | | | | | |
| Mailing Addr | ress PO Box 366676 | | | | | 10 | 24 | 2012 | _ | | | |
| City San Juan | | State PR | Zip Code 00936 | | Am | ount of Ea | ach Disbu | ursement this P | eriod | | | |
| Purpose of I In-kind - Fu | Disbursement ndraising meals | | | | Trans | 104.75 Transaction ID : SB17.10602 | | | | | | |
| Candidate N | lame | | | Category/ Type | <u>/</u> | | | | | | | |
| Office Sough | nt: House Senate President District: | Disbursement For Primary Other (s | X General | | | | | | | | | |
| Full Name (L | ast, First, Middle Initial) | | | | | | | | | | | |
| Maria L. Santaella Arguinzoni | | | | | | Date of Disbursement | | | | | | |
| Mailing Addr | ress PO Box 366676 | | | | M | 10 / | 27 | 2012 | Y | | | |
| City | | State | Zip Code | | Am | ount of Ea | ach Disbu | ursement this P | eriod | | | |
| | San Juan PR 00936 Purpose of Disbursement | | | | <u>-</u> Г | 800.00 | | | | | | |
| In-kind - Fu | n-kind - Fundraising Meals and Beverages | | | | Trans | saction ID | : SB17.1 | 0592 | | | | |
| Candidate N | | | | Category/ Type | / | | | | | | | |
| Office Sough | nt: House Senate President District: | Disbursement For Primary Other (s | X General | | | | | | | | | |
| · | ast, First, Middle Initial) | • | | | | | | | | | | |
| _{C.} Nilda Sc | lilda Soto Mejias | | | | | te of Disb | ursement | | | | | |
| Mailing Addr | Mailing Address Cond. Caguas Tower Apt 1107 | | | | | 10 / D D / Y Y Y Y Y 1 1 2012 | | | | | | |
| City | | | p Code | | Am | ount of Ea | ach Disbu | ursement this P | eriod | | | |
| Caguas Purpose of I Meals and g | Caguas PR 00725 Purpose of Disbursement Meals and gas expenses | | | | | , | | 94. | 19 | | | |
| Candidate Name | | | | 001 Category/ | Trans | action ID | : SB17.10 | 0747 | | | | |

Type

Office Sought:

State:

House

Senate

District:

President

Disbursement For: 2012

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

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

Primary

Other (specify)

General

998.94

1mage# 13961071277 PAGE 103 / 133

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: SB17 Transaction ID: SB17.10747

Disbursement under \$200 aggregated to original vendor.

Form/Schedule: Transaction ID:

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | FOR LINE NUMBER: | | | | AGE | 104 (|)F | 133 | |
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| for each category of the Detailed Summary Page | X | 17 | | 18 | | 19a | | 19b | |
| Detailed Summary Page | | 20a | | 20b | | 20c | | 21 | |
| ay not be sold or used by any person for the purpose of soliciting contributions address of any political committee to solicit contributions from such committee. | | | | | | | | | |
| • | | | | | | | | | |

Any information copied from such Reports and Statements ma or for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC Full Name (Last, First, Middle Initial) Date of Disbursement A. Nilda Soto Mejias 2012 Mailing Address Cond. Caguas Tower 10 31 Apt 1107 City State Zip Code Amount of Each Disbursement this Period PR Caguas 00725 Purpose of Disbursement 500.00 Meals and gas expenses 002 Transaction ID: SB17.10744 Candidate Name Category/ Type Disbursement For: 2012 Office Sought: House Senate Primary ✓ General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Nilda Soto Mejias Date of Disbursement Mailing Address Cond. Caguas Tower 11 15 2012 Apt 1107 City State Zip Code Amount of Each Disbursement this Period PR 00725 Caguas 500.00 Purpose of Disbursement Meals and gas expenses 001 Transaction ID: SB17.10847 Candidate Name Category/ Type Disbursement For: Office Sought: 2012 House Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Aurora Vaillant Cancio Mailing Address 892 General Valero St. 10 29 2012 Urb. Las Delicias City State Zip Code Amount of Each Disbursement this Period 00924 San Juan PR Purpose of Disbursement 460.00 Fundraising Expenses-Music 003 Transaction ID : SB17.10713 Candidate Name Category/ Type Office Sought: Disbursement For: 2012 House X General Senate Primary President Other (specify) State: District: 1460.00 SUBTOTAL of Disbursements This Page (optional).....

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

1mage# 13961071279 PAGE 105 / 133

: 97 A = G7 9 @ G5 B9 CI G'H9 LH F 9 @ 5 H9 8 'HC '5 F 9 DC F HZ G7 < 98 I @ 'C F '+ H9 A = N 5 H= C B

Form/Schedule: SB17

Transaction ID : SB17.10744

Monthly reimbursement of meals and gas expenses made by Mrs. Soto for assisting on fundraisers and campaign activities. No disbursements over \$200 aggregated to original vendor.

Form/Schedule: SB17 Transaction ID: SB17.10847

Monthly reimbursement of meals and gas expenses made by Mrs. Soto for assisting on fundraisers and campaign

activities. No disbursements over \$200 aggregated to original vendor.

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | FOR LINE NUMBER: | | | | PAGE | 106 O | F | 133 | |
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| ay not be sold or used by any person for the purpose of soliciting contributions | | | | | | | | | |

Any information copied from such Reports and Statements ma 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) Date of Disbursement Edgardo Miguel Vazquez Rivera 2012 Mailing Address Tabonuco St. B-5 suite 216 10 18 PMB-112 City State Zip Code Amount of Each Disbursement this Period PR Guaynabo 00968-3022 Purpose of Disbursement 2325.00 Salary 001 Transaction ID: SB17.10692 Candidate Name Category/ Type Disbursement For: 2012 Office Sought: House Senate Primary ✓ General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Edgardo Miguel Vazquez Rivera Date of Disbursement Mailing Address Tabonuco St. B-5 suite 216 10 18 2012 PMB-112 City Zip Code State Amount of Each Disbursement this Period PR 00968-3022 Guaynabo 66.62 Purpose of Disbursement Reimbursement-Meals expenses 001 Transaction ID: SB17.10694 Candidate Name Category/ Type Disbursement For: Office Sought: 2012 House X General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Edgardo Miguel Vazquez Rivera Mailing Address Tabonuco St. B-5 suite 216 10 2012 31 PMB-112 City Zip Code State Amount of Each Disbursement this Period 00968-3022 Guaynabo PR 2325.00 Purpose of Disbursement Salary 001 Transaction ID : SB17.10740 Candidate Name Category/ Type Office Sought: Disbursement For: 2012 House X General Primary Senate President Other (specify) State: District: 4716.62 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

1mage# 13961071281 PAGE 107 / 133

: 97 'A = G7 9 @ G B9 CI G'H9 LH F 9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F '+ H9 A = N5 H= C B

Form/Schedule: SB17

Transaction ID: SB17.10694

Reimbursement of meals expenses made by Mr. Vazquez on campaign activity. Disbursements to the original vendor

under \$200 aggregated.

Form/Schedule: Transaction ID:

| | CHEDULE B (FEC F EMIZED DISBURSEI | - | Use separate sch for each category Detailed Summar | of the | FOR LINE NUMBER: PAGE 108 OF 133 (check only one) X 17 | | | | | |
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| | | | | | person for the purpose of soliciting contributions are to solicit contributions from such committee. | | | | | |
| \rangle | NAME OF COMMITTEE (In Ful COX ALOMAR 2012 | • | | | | | | | | |
| Full Name (Last, First, Middle Initial) A. Edgardo Miguel Vazquez Rivera | | | | | Date of Disbursement | | | | | |
| | Mailing Address Tabonuco St. PMB-112 | B-5 suite 216 | | | 11 01 2012 | | | | | |
| | City Guaynabo | State PR | Zip Code 00968-3022 | | Amount of Each Disbursement this Period | | | | | |
| | | lls and gas expenses-Reimbursement | | | 536.85 Transaction ID : SB17.10743 | | | | | |
| | Candidate Name | | | Category/ Type | | | | | | |
| | Office Sought: House Senate Preside | Disbursement For Primary Other (s | X General | | | | | | | |
| | State: District: Full Name (Last, First, Middle | :ki-a \ | | | | | | | | |
| 3. | WPAB, Inc. Mailing Address PO Box 7243 | IIIIIIai) | | | 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 | Zip Code | | Amount of Each Disbursement this Period | | | | | |
| | Ponce | PR | 00732 | | | | | | | |
| Purpose of Disbursement Radio Ads. | | | | 004 | 600.00 Transaction ID : SB17.10737 | | | | | |
| | Candidate Name | | | Category/ Type | | | | | | |
| | Office Sought: House Senate Preside | Disbursement For Primary Other (s | X General | | | | | | | |
| | State: District: Full Name (Last, First, Middle | Initial) | | | | | | | | |
| Э. | WUPR | ······································ | | | Date of Disbursement | | | | | |
| | Mailing Address PO Box 868 | | | 10 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | | | |
| | City Utuado | | p Code 0641 | | Amount of Each Disbursement this Period | | | | | |
| | Purpose of Disbursement Radio Ads. | PR 0 | 004 | 600.00 | | | | | | |
| | Candidate Name | | | Category/ Type | Transaction ID : SB17.10748 | | | | | |
| | Office Sought: House Senate Preside | Disbursement For Primary Other (s | General | | | | | | | |
| | State: District: | | | | | | | | | |
| | | | | | 4700.05 | | | | | |

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

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

1mage# 13961071283 PAGE 109 / 133

: 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SB17

Transaction ID: SB17.10743

Reimbursement of meals and gas expenses made by Mr. Vaqzquez on campaign activity. Disbursement to original vendor: Bahias Restaurant, Alfonso XIII St, Playa de Ponce, Ponce, Puerto Rico 00716. Purpose: Meals of campaign activity (Press conference and meeting with farmers). Amount: \$402.50 Date: 10/31/2012. Other disbursements under \$200 aggregated to the original vendor.

Form/Schedule: Transaction ID:

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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| Any information copied from such Reports and Statements may not be sold or use for commercial purposes, other than using the name and address of any politic | | rson for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | |
| Full Name (Last, First, Middle Initial) YP Catering Mailing Address BO Roy 192272 | | Date of Disbursement 10 20 2012 |
| Mailing Address PO Box 192273 | | |
| City State Zip Code San Juan PR 00919 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement Fundraising Expenses-Meals | 003 | 400.00 Transaction ID : SB17.10699 |
| Candidate Name | Category/ Type | |
| Office Sought: House Senate President Disbursement For: 2012 Primary Other (specify) | | |
| State: District: Full Name (Last, First, Middle Initial) | | |
| Mailing Address | | Date of Disbursement |
| City State Zip Code | | Amount of Each Disbursement this Period |
| Purpose of Disbursement | | |
| Candidate Name | Category/ Type | |
| Office Sought: House | | |
| Full Name (Last, First, Middle Initial) | | Date of Disbursement |
| >. | | Date of Disbursement |
| Mailing Address | | |
| City State Zip Code | | Amount of Each Disbursement this Period |
| Purpose of Disbursement | · · · · | |
| Candidate Name | Category/ Type | |
| Office Sought: House Senate President State: Disbursement For: Primary Other (specify) Other (specify) | | |
| SUBTOTAL of Disbursements This Page (optional) | | 400.00 |
| TOTAL This Period (last page this line number only) | | 150776.70 |

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| | CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS | Use separate sch for each category Detailed Summary | edule(s) (of the | FOR LINE NUMBER: PAGE 111 OF 133 (check only one) 17 |
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| | y information copied from such Reports and Statements m for commercial purposes, other than using the name and | | | |
| \rangle | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | | |
| ١. | Full Name (Last, First, Middle Initial) Eugenio M. Alonso | | | Date of Disbursement |
| | Mailing Address Urb. Baldrich 202 Tous Soto St. | | | 10 30 2012 |
| | City State San Juan PR | Zip Code 00918 | | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Refund of Contribution | | 010 | 221.45 Transaction ID : SB20A.10850 |
| | Candidate Name | | Category/ Type | |
| | Office Sought: House Senate Primary President Other (s | X General | | |
| | Full Name (Last, First, Middle Initial) | | | |
| 3. | Sergio L. Chevere Mourino | | | Date of Disbursement |
| | Mailing Address Urb. El Monte 3166 Marbella St. | | | 10 30 2012 |
| | City State Ponce PR | Zip Code 00716-4808 | | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Refund of Contributions | | 010 | 1250.00 |
| | Candidate Name | | Category/ Type | Transaction ID : SB20A.10851 |
| | Office Sought: House Senate Primary President Other (s | X General | | |
| | State: District: Full Name (Last, First, Middle Initial) | | | |
|). | Jose Ramon Cumba | | | Date of Disbursement |
| | Mailing Address PO Box 130 | | | 10 / D D / Y Y Y Y Y Y 30 2012 |
| | • | p Code 0960 | | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Refund of contribution | | 010 | 500.00 |
| | Candidate Name | | Category/ Type | Transaction ID : SB20A.10751 |
| | Office Sought: House Senate Primary President Disbursement For Primary Other (s | X General | • | |
| | State: District: | | | |
| | | | | 4074.45 |

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | FOR LINE NUMBER: | | PAGE | 112 | OF | 133 |
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| Use separate schedule(s) | (check only one) | | | | | |
| for each category of the Detailed Summary Page | 17 | 18 | | 19a | | 19b |
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| av not be sold or used by any | person for the purpos | e of so | olicitino | contri | butio | ns |

Any information copied from such Reports and Statements may 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) Date of Disbursement A. Jose Fas Quinones 2012 Mailing Address Chalets de Cupey 10 30 200 Ave. Los Chalets 93 Apt. L124 Zip Code City State Amount of Each Disbursement this Period PR San Juan 00926 Purpose of Disbursement 1000.00 Refund of Contributions. 010 Transaction ID: SB20A.10852 Candidate Name Category/ Type Disbursement For: 2012 Office Sought: House Senate Primary ✓ General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Jorge L. Sanchez Colon Date of Disbursement Mailing Address Chalets de Santa Maria # 24 10 30 2012 City State Zip Code Amount of Each Disbursement this Period PR 00927 San Juan Purpose of Disbursement Refund of Contribution 700.00 010 Transaction ID: SB20A.10843 Candidate Name Category/ Type Disbursement For: Office Sought: 2012 House X General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House Senate General Primary President Other (specify) State: District: 1700.00 SUBTOTAL of Disbursements This Page (optional)..... 3671.45 TOTAL This Period (last page this line number only).....

| | CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS | Use separate sch for each category Detailed Summan | edule(s) of the | FOR LINE NUMBER: (check only one) 17 |
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| | y information copied from such Reports and Statements n for commercial purposes, other than using the name and | | | |
| \rangle | NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC | | | |
| ۸. | Full Name (Last, First, Middle Initial) Banco Popular de Puerto Rico | | | Date of Disbursement |
| | Mailing Address P.O. Box 362708 | | | 10 18 2012 |
| | City State San Juan PR | Zip Code 00936-2708 | | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Bank adjustment | | | 30.00 Transaction ID : SB21.10688 |
| | Candidate Name | 2042 | Category/ Type | |
| | Office Sought: House Senate President State: Disbursement For Primary Other (s | General | | |
| 3. | Full Name (Last, First, Middle Initial) Javier J Lamboy Hernandez Mailing Address Carmen St. # 5 | | | Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | Isabelle Bldg Apt # 2 City State San Juan PR | Zip Code 00917 | | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Meals and gas expenses | | 001 | 645.64 Transaction ID : SB21.10689 |
| | Candidate Name | | Category/ Type | Halisaction ib . 3521.10009 |
| | Office Sought: House Disbursement Formary President Office Sought: Primary Other (s | General | | |
| | State: District: | | | |
| Э. | Full Name (Last, First, Middle Initial) | | | Date of Disbursement |
| | Mailing Address | | | M M / D D / Y Y Y Y |
| | • | ip Code | | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Candidate Name | | Category/ Type | |
| | Office Sought: House Senate President Disbursement For Primary Other (s | General | ×1 | |
| | State: District: | | | |
| | | | | 675.64 |

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

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

675.64

Image# 13961071288 PAGE 114 / 133

: 97 A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHZ'G7 < 98 I @ 'CF' ± H9 A ± N5 H± CB

Form/Schedule: SB21

Transaction ID : SB21.10689

Reimbursement of meal and gas expenses made by Mr. Lamboy on campaign duties such as, attending to meetings and fundraising activitites. Disbursements over \$200 aggregated: Original vendor: Shell Baldrich, Coll y Toste St. Hato Rey, Puerto Rico 00918 Amount: \$25.76 made on 10/16/2012, \$24.94 on 10/12/2012, \$24.82 on 10/06/2012; \$21.94 on 10/05/2012; \$16.99 on 09/08/2012; \$20.80 on09/30/2012; \$22.00 on 09/26/2012; and 30.97 on 10/09/2012. Purpose: Gas and meals expenses. Other disbursements under \$200 aggregated to the original vendor.

Form/Schedule: Transaction ID:

Excluding Loans

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

FOR LINE NUMBER: (check only one)

PAGE 115 OF

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| | OX ALOMAR 2012 IN | 1C | |
|----|---|---------------------------------------|--|
| | A. Full Name (Last, First, Middle Initial) of Debto Pedro Clemente Quinones | r or Creditor | Nature of Debt (Purpose): overpayment |
| | | | |
| | Mailing Address Urb. Country Club 1100 Carmen Busello St. | | |
| Ī | City State | Zip Code | |
| - | San Juan | PR 00924 | |
| | Outstanding Balance Beginning This Period 100.01 | | Transaction ID : SD9.4979 |
| | Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 100.01 |
| | B. 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 |
| | | | |
| | C. Full Name (Last, First, Middle Initial) of Debto | r 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 |
| | | 9 9 9 | |
| 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 |

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 116 OF
FOR LINE NUMBER:
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| COX ALOMAR 2012 IN | IC . | |
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| A. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): |
| Carmen E. Acevedo Betancourt | | Professional services-Media advisor |
| | | _ |
| Mailing Address Urb. Roosvelt Canals St. #451 | | |
| City State | Zip Code | _ |
| San Juan | PR 00918 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.7470 |
| | | |
| 98.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 98.00 |
| 9 9 9 | 7 7 | |
| B. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): |
| Karenin Biaggi Velazquez | | Professional services-Issues asisstant |
| Mallion Address | | _ |
| Mailing Address Tintillo Gardens | | |
| 6 St. M-21 City State | Zip Code | _ |
| Guaynabo | PR 00966 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.7202 |
| | | |
| 1500.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 1500.00 |
| | 7 7 | |
| C. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): |
| Caguas Expressway Motors | | Car Rental |
| Mailing Address | | |
| Mailing Address P.O Box 50045 | | |
| City | State Zip Code | |
| San Juan | PR 00902 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.9862 |
| 1460.00 | | |
| 9 9 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 1460.00 |
| , | | 7 |
| | | 2052.00 |
| 1) SUBTOTALS This Period This Page (optional) | | 3058.00 |
| O) TOTAL C This Doctor Manhage Will " | | |
| 2) TOTALS This Period (last page this line number | oniy) | |
| 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) | > |

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 117 OF
FOR LINE NUMBER:
(check only one)

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| COX ALOMAR 2012 IN | C | |
|---|---------------------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): hotel room expense |
| Luis Calderon Navarro | | Hotel room expense |
| Mailing Address PO Box 315 | | 1 |
| City State | Zip Code | _ |
| Loiza | PR 00772 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.5018 |
| 130.80 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 130.80 |
| | 7 | 7 7 7 |
| B. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): Campaign Media and Promotion |
| Central 12 | | 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 | | Transaction ID : SD10.4976 |
| 5000.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 5000.00 |
| C. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): |
| Central 12 | | 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 | | Transaction ID : SD10.5770 |
| 18000.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 18000.00 |
| 1) SUBTOTALS This Period This Page (optional) | > | 23130.80 |
| 2) TOTALS This Period (last page this line number of | | |
| 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) | |

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 118 OF
FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

| Code 2 00968 Payment This Period 0.00 | Nature of Debt (Purpose): Campaign Media and Promotion Transaction ID : SD10.7212 |
|--|--|
| 00968 Payment This Period | |
| Payment This Period | |
| | |
| | Outstanding Release at Class of This David |
| | Outstanding Release at Class of This Paris |
| | |
| 0.00 | Outstanding Balance at Close of This Period |
| | 150.00 |
| or | Nature of Debt (Purpose): |
| | Campaign Media and Promotion |
| | |
| | 1 |
| | |
| Code | 1 |
| 00968 | |
| | Transaction ID : SD10.7213 |
| | Transaction is 1 os 1011210 |
| | |
| Payment This Period | Outstanding Balance at Close of This Period |
| r aymont This r chou | |
| 0.00 | 600.00 |
| itor | Nature of Debt (Purpose): |
| | Campaign Media and Promotion |
| | |
| | |
| | |
| Zip Code | |
| 00968 | |
| | Transaction ID : SD10.7214 |
| | |
| | |
| Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 1200.00 |
| 3.30 | 1255.00 |
| | |
| > | 1950.00 |
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| > | |
| ige only) | |
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Excluding Loans

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

PAGE 119 OF FOR LINE NUMBER: (check only one)

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133

| NAME OF COMMITTEE (In Full) | | |
|-----------------------------|------|-----|
| COX ALOMAR | 2012 | INC |

| COX ALOWAR 2012 IN | <u> </u> | |
|---|-------------------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor | Nature of Debt (Purpose): | |
| Central 12 | | Campaign Media and Promotion-Social Media |
| Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406 | | |
| City State | Zip Code | |
| Guaynabo | PR 00968 | |
| | | Transaction ID : SD10.7215 |
| Outstanding Balance Beginning This Period 2160.00 | | Transaction ID: SD10.7215 |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 2160.00 |
| B. Full Name (Last, First, Middle Initial) of Debtor o | r Creditor | Nature of Debt (Purpose): |
| Central 12 | | Campaign Media and Promotion-Social Media |
| Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406 | | |
| City State | Zip Code | |
| Guaynabo | PR 00968 | |
| 2160.00 Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 2160.00 |
| C. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): |
| Central 12 | | 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 2160.00 | | Transaction ID : SD10.7217 |
| | Doument This Device | Outotanding Polance at Olera of This Polant |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 2160.00 |
| SUBTOTALS This Period This Page (optional) | > | 6480.00 |
| TOTALS This Period (last page this line number or | nly) | |
| TOTAL OUTSTANDING LOANS from Schedule C | (last page only) | |
| ADD 2) and 3) and carry forward to appropriate lin | ne of Summary Page (last page only) | |

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 120 OF
FOR LINE NUMBER:
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| COX ALOMAR 2012 IN | NC | |
|--|------------------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debto | or or Creditor | Nature of Debt (Purpose): Administrative expenses-Telephone services for campaign staff |
| Mailing Address PO Box 70366 | | |
| City State | Zip Code | |
| San Juan | PR 00936-8366 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.7208 |
| 432.94 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | , , , | 0.00 432.94 |
| B. Full Name (Last, First, Middle Initial) of Debtor Pedro Clemente Quinones | or Creditor | Nature of Debt (Purpose): Campaign Jingle |
| Mailing Address Urb. Country Club 1100 Carmen Busello St. | | |
| City State San Juan | Zip Code PR 00924 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.4256 |
| -100.01 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 7 | 0.00 -100.01 |
| C. Full Name (Last, First, Middle Initial) of Debto | or or Creditor | Nature of Debt (Purpose): |
| Jose Cruz | | Professional services- Media advisor |
| Mailing Address PO Box 443 | | |
| City | State Zip Code | |
| Juncos | PR 00777 | Townson's Up. OD40 7477 |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.7477 |
| 140.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | | 0.00 |
| 1) SUBTOTALS This Period This Page (optional) | | 472.93 |
| 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 of | only) ► |

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: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

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:

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 122 OF
FOR LINE NUMBER:
(check only one)

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| COX ALOMAR 2012 IN | IC | |
|---|-------------------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debto Jose Cruz | Nature of Debt (Purpose): Salary | |
| Mailing Address PO Box 443 | | |
| City State | Zip Code | |
| Juncos | PR 00777 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.9854 |
| 140.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 7 | 0.00 |
| B. Full Name (Last, First, Middle Initial) of Debtor Eastern America Insurance Agen | | Nature of Debt (Purpose): Insurance |
| Mailing Address PO Box 193900 | | |
| City State San Juan | Zip Code PR 00919 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.7490 |
| 1227.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | | 0.00 |
| C. Full Name (Last, First, Middle Initial) of Debto | r or Creditor | Nature of Debt (Purpose): |
| Facilities Management and Janite | orial Services | janitorial services - committee's offices |
| Mailing Address PO Box 366586 | | |
| City | State Zip Code | |
| San Juan | PR 00936-6586 | |
| 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 | 7 7 | 0.00 220.00 |
| SUBTOTALS This Period This Page (optional) | | 1587.00 |
| 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 of | only) ► |

Excluding Loans

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PAGE 123 OF FOR LINE NUMBER: (check only one)

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| COX ALOMAR 2012 IN | | | |
|--|---|---|--|
| A. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): Professional services- Statistics analyst | |
| Carl Gibbs Acosta | Carl Gibbs Acosta | | |
| Mailing Address Cape Village B-4 Buzon 110 | | - | |
| City State | Zip Code | | |
| Carolina | PR 00979 | | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.7472 | |
| 140.00 | | | |
| 140.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 140.00 | |
| , | 7 | 7 | |
| B. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): | |
| Carl Gibbs Acosta | | Salary | |
| Mailing Address Cane Village B-4 Buzon 110 | | | |
| Mailing Address Cape Village B-4 Buzon 110 | | | |
| City State | Zip Code | | |
| Carolina | PR 00979 | | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.9855 | |
| 140.00 | | | |
| 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 Debto | r or Creditor | Nature of Debt (Purpose): | |
| Richard Guzman Rivera | | Field Operations Expeneses-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 | |
| 1500.00 | | | |
| 7 7 7 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 1200.00 | 300.00 | |
| | , | , , , | |
| | | 500.00 | |
| 1) SUBTOTALS This Period This Page (optional) | > | 580.00 | |
| 2) TOTALS This Period (last page this line number | only) | , , | |
| 3) TOTAL OUTSTANDING LOANS from Schedule (| C (last page only) | | |
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Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 124 OF
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| COX ALOMAR 2012 IN | 1C | | |
|--|---------------------------|-------------|---|
| A. Full Name (Last, First, Middle Initial) of Debto Miguel Hernandez Agosto | r or Creditor | | Nature of Debt (Purpose): Professional services-Campaign director |
| Mailing Address Apartado 367746 | | | - |
| City State | Zip Code | 77.40 | _ |
| San Juan | PR 00936- | 7746 | Transporting ID OD40 7400 |
| Outstanding Balance Beginning This Period | | | Transaction ID : SD10.7482 |
| 350.00 | | | |
| Amount Incurred This Period | Payment This Pe | eriod | Outstanding Balance at Close of This Period |
| 0.00 | , , , , , | 0.00 | 350.00 |
| B. Full Name (Last, First, Middle Initial) of Debtor Miguel Hernandez Agosto | or Creditor | | Nature of Debt (Purpose): Salary |
| Mailing Address Apartado 367746 | | | |
| City State San Juan | Zip Code PR 00936- | 7746 | |
| Outstanding Balance Beginning This Period | | | Transaction ID : SD10.9858 |
| 350.00 | | | |
| Amount Incurred This Period | Payment This Pe | oriod | Outstanding Balance at Close of This Period |
| | rayment mis re | 0.00 | 350.00 |
| 0.00 | 7 7 | 0.00 | 330.00 |
| C. Full Name (Last, First, Middle Initial) of Debto | or or Creditor | | Nature of Debt (Purpose): |
| Imperial Credit Corporation | | | insurance premium |
| Mailing Address PO Box 9777 | | | - |
| City | State Zip Code | | |
| San Juan | PR 00908-07 | 777 | |
| Outstanding Balance Beginning This Period | | | Transaction ID : SD10.5754 |
| 499.10 | | | |
| Amount Incurred This Period | Payment This Pe | eriod | Outstanding Balance at Close of This Period |
| 0.00 | , , | 0.00 | 499.10 |
| SUBTOTALS This Period This Page (optional) | | | 1199.10 |
| 1) SOBIOTALS THIS FEHOU THIS FAGE (OPTIONAL) | | | |
| 2) TOTALS This Period (last page this line number | only) | > | |
| 3) TOTAL OUTSTANDING LOANS from Schedule | C (last page only) | > | |
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Excluding Loans

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FOR LINE NUMBER:
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| COX ALOMAR 2012 IN | 1C | |
|--|---------------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debto | r or Creditor | Nature of Debt (Purpose): office furniture for Cox Alomar Committee |
| Importadora Espanola | | |
| Mailing Address Corporate Office Park Road No. 20 Suite 500 | | |
| City State | Zip Code | |
| Guaynabo | PR 00966 | |
| Outstanding Balance Beginning This Period | | Transaction ID: SD10.5752 |
| 2242.21 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | | 0.00 2242.21 |
| B. Full Name (Last, First, Middle Initial) of Debtor Javier J Lamboy Hernandez | or Creditor | Nature of Debt (Purpose): Professional services- Assistant treasurer, Compliance advisory |
| Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2 | | |
| City State San Juan | Zip Code PR 00917 | |
| | FR 00017 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.7476 |
| 175.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 7 7 | 0.00 |
| C. Full Name (Last, First, Middle Initial) of Debto | or or Creditor | Nature of Debt (Purpose): |
| Javier J Lamboy Hernandez | | Salary |
| Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2 | | |
| City | State Zip Code | |
| San Juan | PR 00917 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.9853 |
| 210.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | | 0.00 210.00 |
| 9 9 9 | | g |
| 4) CURTOTALC This David This Dave (autional) | | 2627.21 |
| 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) ► |

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 126 OF
FOR LINE NUMBER:
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| COX ALOMAR 2012 IN | 1C | | |
|--|-------------------------------|---------------|---|
| A. Full Name (Last, First, Middle Initial) of Debto | or or Creditor | | Nature of Debt (Purpose): Salary |
| Mailing Address Terranova 4B9 St. | | | - |
| City State Guaynabo | Zip Code PR 00969 | | _ |
| Outstanding Balance Beginning This Period | | | Transaction ID : SD10.9860 |
| 140.00 | | | |
| Amount Incurred This Period | Payment This Pe | eriod | Outstanding Balance at Close of This Period |
| 0.00 | | 0.00 | 140.00 |
| B. Full Name (Last, First, Middle Initial) of Debtor Ernesto Morales Ramos | or Creditor | | Nature of Debt (Purpose): Reimburstment of meals and gasoline expenses |
| Mailing Address 2 Cond. San Francisco VLG Apt. 109 | | | |
| City State Carolina | Zip Code PR 00987-6 | 950 | |
| Outstanding Balance Beginning This Period 107.03 Amount Incurred This Period 0.00 | Payment This Pe | eriod 0.00 | Transaction ID : SD10.7186 Outstanding Balance at Close of This Period 107.03 |
| C. Full Name (Last, First, Middle Initial) of Debte Ernesto Morales Ramos | or or Creditor | | Nature of Debt (Purpose): Professional services- Media Advisor |
| Mailing Address 2 Cond. San Francisco VLG Apt. 109 | | | |
| City Carolina | State Zip Code PR 00987-69 | 50 | - |
| Outstanding Balance Beginning This Period 385.50 | | | Transaction ID : SD10.7475 |
| Amount Incurred This Period | Payment This Pe | eriod | Outstanding Balance at Close of This Period |
| 0.00 | | 0.00 | 385.50 |
| 1) SUBTOTALS This Period This Page (optional) | | > | 632.53 |
| 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 | e line of Summary Page (last | page only) | 7 7 7 7 |

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 127 OF
FOR LINE NUMBER:
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| COX ALOMAR 2012 IN | IC . | |
|--|---------------------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): |
| Ernesto Morales Ramos | | Salary |
| Mailing Address 2 Cond. San Francisco | | _ |
| VLG Apt. 109 | | |
| City State | Zip Code | |
| Carolina | PR 00987-6950 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.9856 |
| 228.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 228.00 |
| 7 7 | 9 9 | 9 9 9 |
| B. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): |
| Ivonne Otero Santiago | | Salary |
| Mailing Address Calle 2 #77 Urb. Paseo Alto | | |
| | | |
| City State San Juan | Zip Code PR 00926 | |
| | 110 00020 | Turning the ID OD40 0050 |
| Outstanding Balance Beginning This Period | | Transaction ID: SD10.9859 |
| 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 | r or Creditor | Nature of Debt (Purpose): equipment and postage meter rental |
| Pitney Bowes | | equipment and postage moter remai |
| Mailing Address 362 Avenida de la Constitucion | | |
| City | Ctata Zin Coda | _ |
| City San Juan | State Zip Code PR 00901 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.5772 |
| | | |
| 351.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 351.00 |
| | | |
| 1) SUBTOTALS This Poried This Page (anticant) | | 719.00 |
| 1) SUBTOTALS This Period This Page (optional) | | 7 7 |
| 2) TOTALS This Period (last page this line number | only) | |
| O TOTAL OUTOTANDING : CANC (| 2 (11 1) | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C | C (last page only) | |
| 4) ADD 2) and 3) and carry forward to appropriate | line of Summary Page (last page only) | |

Excluding Loans

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

PAGE 128 OF FOR LINE NUMBER: (check only one)

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| A. Full Name (Last, First, Middle Initial) of Debto | r or Creditor | | Nature of Debt (Purpose): |
|---|----------------------|-----------------|---|
| Restaurante Antonio | Fundraising Expenses | | |
| Mailing Address 1406 Magdalena Ave. | | | |
| City State | Zip Code | | |
| San Juan | PR | 00907 | |
| Outstanding Balance Beginning This Period | | | Transaction ID : SD10.9641 |
| 1000.00 | | | |
| Amount Incurred This Period | Paym | ent This Period | Outstanding Balance at Close of This Period |
| 0.00 | | 0.00 | 1000.00 |
| 3. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | | Nature of Debt (Purpose): |
| Ricoh PR | | | copy machine |
| Mailing Address National Plaza Bldg suite 1700 | | | |
| 431 Ponce de Leon Ave. City State | Zip Code | | _ |
| San Juan | PR | 00917 | |
| Outstanding Balance Beginning This Period | | | Transaction ID: SD10.4971 |
| 2745.00 | | | |
| Amount Incurred This Period | Paym | ent This Period | Outstanding Balance at Close of This Perio |
| 0.00 | | 0.00 | 2745.00 |
| C. Full Name (Last, First, Middle Initial) of Debto | r or Creditor | | Nature of Debt (Purpose): |
| Ricoh PR | | | Office expenses-Printing services |
| Mailing Address National Plaza Bldg suite 1700 431 Ponce de Leon Ave. | | | |
| Dity | State | Zip Code | |
| San Juan | PR | 00917 | Transportion ID - CD40 7004 |
| Outstanding Balance Beginning This Period | | | Transaction ID : SD10.7204 |
| 305.00 | | | |
| Amount Incurred This Period | Paym | ent This Period | Outstanding Balance at Close of This Period |
| 0.00 | | 0.00 | 305.00 |
| | | | 4050.00 |
| SUBTOTALS This Period This Page (optional) | | | |
| TOTALS This Period (last page this line number only) | | | |
| TOTAL OUTSTANDING LOANS from Schedule | C (last page only | /) | |
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Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 129 OF FOR LINE NUMBER: (check only one)

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133

| NAME OF COMMITTEE (In Full) | | |
|-----------------------------|------|-----|
| | 0040 | INI |

| COX ALOWAR 2012 IN | C | |
|---|--------------------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): |
| A. Miguel Rios | | Professional services-Sound vehicles for campaign activities. |
| Mailing Address Valle Verde II Ap-1 Rio Maravilla Street | | |
| City State | Zip Code | |
| Bayamon | PR 00961 | |
| | | Transaction ID : SD10.7196 |
| Outstanding Balance Beginning This Period 3250.00 | | Transaction ID: SDT0.7196 |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 3250.00 |
| B. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): |
| A. Miguel Rios | | Rental_Sound Vehicle |
| Mailing Address Valle Verde II Ap-1 Rio Maravilla Street | | |
| City State | Zip Code | |
| Bayamon | PR 00961 | |
| Outstanding Balance Beginning This Period 11700.00 | | Transaction ID : SD10.9849 |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 11700.00 |
| C. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): |
| A. Miguel Rios | or creater | Sound Vehicle Rental |
| Mailing Address Valle Verde II Ap-1 Rio Maravilla Street | | - |
| City | State Zip Code | |
| Bayamon | PR 00961 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.10273 |
| 3250.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 3250.00 |
| SUBTOTALS This Period This Page (optional) | > | 18200.00 |
| | | |
| TOTALS This Period (last page this line number of | only) | |
|) TOTAL OUTSTANDING LOANS from Schedule C | (last page only) | |
| ADD 2) and 3) and carry forward to appropriate I | ine of Summary Page (last page only) | , , |

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 130 OF
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| COX A | LOMAR 2012 IN | IC | | | |
|--|--|-----------------|--------------------|---------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | | 1 | Nature of Debt (Purpose): | |
| Carmer | Carmen Angeles Rodriguez Weber | | | | Professional serices- Fundraiser coordinator |
| Mailing Addra | 200 0 17 11 5 1 | | | | |
| Mailing Addre | Cond. Torre de los Frailes Apt. 11 J | | | | |
| City | State | Zip Code | | | |
| Guaynabo | | PR | 00969 | | |
| Outstanding | g Balance Beginning This Period | | | | Transaction ID : SD10.7471 |
| | 140.00 | | | | |
| A | avert leavered This David | D | and This Deviced | | Outstanding Balance at Olace of This Basind |
| Amo | ount Incurred This Period | Payi | ment This Period | | Outstanding Balance at Close of This Period |
| | 0.00 | | | 0.00 | 140.00 |
| B. Full Namo | (Last, First, Middle Initial) of Debtor | or Craditor | | | Nature of Debt (Purpose): |
| | ou Osba/Shell Abuosba | or Orealtor | | ' | Gas Expenses |
| | | | | | |
| Mailing Addre | orb. carry igaciin | | | | |
| City | 1426 Luisa Capetilo St. State | Zip Code | | | |
| San Juan | State | PR | 00921 | | |
| Outstanding | g Balance Beginning This Period | | | I | Transaction ID : SD10.9851 |
| Catatarian | | | | | |
| | 1970.00 | | | | |
| Amo | ount Incurred This Period | Рауг | ment This Period | | Outstanding Balance at Close of This Period |
| | 0.00 | | | 0.00 | 1970.00 |
| | , | 7 | , | | |
| | e (Last, First, Middle Initial) of Debtor | or Creditor | | 1 | Nature of Debt (Purpose): Gas Expenses |
| Sami Al | bu Osba/Shell Abuosba | | | | Cas Expenses |
| Mailing Addre | ess Urb. San Agustin | | | | |
| | 1426 Luisa Capetilo St. | | | | |
| City | | State | Zip Code | | |
| San Juan | | PR | 00921 | | |
| Outstanding | g Balance Beginning This Period | | | | Transaction ID : SD10.9850 |
| 11 | 1970.00 | | | | |
| Amo | ount Incurred This Period | Payı | ment This Period | | Outstanding Balance at Close of This Period |
| | 0.00 | | | 0.00 | 1970.00 |
| | , | 7 | 7 | | 9 9 9 |
| | | | | | |
| 1) SUBTOTALS | This Period This Page (optional) | | | | 4080.00 |
| O) TOTAL 2 TO | - David de Martin de Marti | | | | |
| 2) TOTALS This | s Period (last page this line number of | oniy) | | > | |
| 3) TOTAL OUT | STANDING LOANS from Schedule C | C (last page on | ly) | | |
| | | | | | |
| 4) ADD 2) and | 3) and carry forward to appropriate | line of Summa | ry Page (last page | only) | |

Excluding Loans

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

PAGE 131 OF FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)

OX ALOMAR 2012 INC

| A. Full Name (Last, First, Middle Initial) of Debtor | | Nature of Debt (Purpose): |
|--|--|---|
| Christopher Sanchez Ortiz | Reimburstments 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 | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | -0.10 |
| B. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): |
| Christopher Sanchez Ortiz | | Professional services- Candidate assistant |
| Mailing Address PO Box 194555 | | _ |
| City State | Zip Code | |
| San Juan | PR 00919 | |
| Outstanding Balance Beginning This Period 105.00 | Decreed This Deced | Transaction ID : SD10.7473 |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 105.00 |
| C. Full Name (Last, First, Middle Initial) of Debtor | r or Creditor | Nature of Debt (Purpose): |
| Christopher Sanchez Ortiz | | Salary |
| Mailing Address PO Box 194555 | | |
| City | State Zip Code | |
| San Juan | PR 00919 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.9857 |
| 1500.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 1500.00 |
| SUBTOTALS This Period This Page (optional) TOTALS This Period (last page this line number | | 1604.90 |
| TOTAL OUTSTANDING LOANS from Schedule (| C (last page only) | 7 7 |
| ADD 2) and 3) and carry forward to appropriate | line of Summary Page (last page only) | |

Excluding Loans

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| $\cup \cup \Lambda$ | HL | JIV. | IAK | ZUIZ | Z HNU | , |

| COX ALOWAR 2012 IN | | |
|---|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor | Nature of Debt (Purpose): Professional services-Political director | |
| Edgardo Miguel Vazquez Rivera | | |
| Mailing Address Tabonuco St. B-5 suite 216 PMB-112 | | |
| City State | Zip Code | |
| Guaynabo | PR 00968-3022 | |
| Outstanding Balance Beginning This Period 175.00 | | Transaction ID : SD10.7474 |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 175.00 |
| B. Full Name (Last, First, Middle Initial) of Debtor of Edgardo Miguel Vazquez Rivera | or Creditor | 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 2675.00 Amount Incurred This Period 0.00 | Payment This Period 0.00 | Transaction ID : SD10.9852 Outstanding Balance at Close of This Period 2675.00 |
| C. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Dobt (Purpose): |
| Vias Car Rental of P.R. | or orealtor | Nature of Debt (Purpose): Vehicles Rental |
| Mailing Address Urb. Costa de Oro C-2 Marginal S | it. | |
| City | State Zip Code | |
| Dorado | PR 00646-2055 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.9863 |
| Amount Incurred This Device | Payment This Period | Outstanding Palance at Class of This Pavied |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 10787.66 |
| SUBTOTALS This Period This Page (optional) TOTALS This Period (last page this line number of | | 13637.66 |
| TOTAL OUTSTANDING LOANS from Schedule C | (last page only) | |
|) ADD 2) and 3) and carry forward to appropriate I | ine of Summary Page (last page only) | |

Excluding Loans

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

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X 10 NAME OF COMMITTEE (In Full) COX ALOMAR 2012 INC Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Campaign vehicles rental. Vias Car Rental of PR Mailing Address Isla Verde Zip Code City PR Carolina 00979 Transaction ID: SD10.7201 Outstanding Balance Beginning This Period 1803.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1803.00 0.00 0.00 B. 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 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 1803.00 1) SUBTOTALS This Period This Page (optional)..... 85812.13 2) TOTALS This Period (last page this line number only)..... 0.00 TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 85812.13 ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)