

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

COX ALOMAR 2012 , INC.

ADDRESS (number and street)
▼

P.O. Box 367921

Check if different
than previously
reported. (ACC)

San Juan

PR

00936-7921

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00506212

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

PR

01

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
03 / 18 / 2012in the
State of

PR

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y
03 / 18 / 2012in the
State of

PR

5. Covering Period

M M / D D / Y Y Y Y
01 / 01 / 2012

through

M M / D D / Y Y Y Y
02 / 27 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jaime Luis Sanabria Montanez

Signature of Treasurer

Jaime Luis Sanabria Montanez

[Electronically Filed]

Date

M M / D D / Y Y Y Y
03 / 08 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

COX ALOMAR 2012 , INC.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	1	2

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	67349.76	85111.59
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	67349.76	85111.59
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	37795.89	44152.39
(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))	37795.89	44152.39
8. Cash on Hand at Close of Reporting Period (from Line 27).....	39409.24	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	100.01	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	59397.74	

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

COX ALOMAR 2012 , INC.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	1	2

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

46461.45

62323.28

(ii) Unitemized.....

19888.31

21788.31

(iii) TOTAL of contributions from individuals ▶

66349.76

84111.59

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

1000.00

1000.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

67349.76

85111.59

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

67349.76

85111.59

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	37795.89	44152.39
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	1045.50	1549.96
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	38841.39	45702.35

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	10900.87
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	67349.76
25. SUBTOTAL (add Line 23 and Line 24).....	78250.63
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	38841.39
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	39409.24

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

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

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 63

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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.

A. Full Name (Last, First, Middle Initial) Hilda Acevedo		Date of Receipt M M / D D / Y Y Y Y Y 01 / 21 / 2012	
Mailing Address Parque del Sol Theves St. A-14		Transaction ID : SA11AI.4925	
City Bayamon	State PR	Zip Code 00959	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 209.46 In-kind - beverages for fundraising event	
Name of Employer unemployed	Occupation Homemaker		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 209.46		
B. Full Name (Last, First, Middle Initial) Rafael Alomar Colon		Date of Receipt M M / D D / Y Y Y Y Y 02 / 13 / 2012	
Mailing Address Cond. Vista Verde Apt. 601 San Ignacio Ave.		Transaction ID : SA11AI.4795	
City San Juan	State PR	Zip Code 00921	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 210.00 In-kind - for installation of lamps in office area	
Name of Employer self employed	Occupation electrician		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 210.00		
C. Full Name (Last, First, Middle Initial) Salvador J Antonetti Stuts		Date of Receipt M M / D D / Y Y Y Y Y 02 / 17 / 2012	
Mailing Address Cond. Park Boulevard Apt. 316 Laurel St. 2305		Transaction ID : SA11AI.4545	
City San Juan	State PR	Zip Code 00913	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Oneill and Borges	Occupation Attorney		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
SUBTOTAL of Receipts This Page (optional).....		669.46	
TOTAL 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 NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Maria T. Aponte

Mailing Address P.O. Box 523152

City

Springfield

State

VA

Zip Code

22152

FEC ID number of contributing
federal political committee.

C

Name of Employer
unemployedOccupation
Homemaker

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2012

Transaction ID : SA11AI.4372

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. Juan M. Aranda

Mailing Address Palma Sola HA-7

City

Guaynabo

State

PR

Zip Code

00966

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Physician

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2012

Transaction ID : SA11AI.4613

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. John Arruza

Mailing Address Paseo Mayor C-31 Street #8

City

San Juan

State

PR

Zip Code

00926

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Physician

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2012

Transaction ID : SA11AI.4720

Amount of Each Receipt this Period

300.00

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

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

1000.00

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

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

FOR LINE NUMBER:

PAGE 7 OF 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

Pablo I. Ateri

Mailing Address PO Box 8387

City

Humacao

State

PR

Zip Code

00792

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employerOccupation
Physician

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		24		2012

Transaction ID : SA11AI.4734

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Guillermo Aviles Aguirrechea

Mailing Address Palma Real D-8 Street # 5

City

Guaynabo

State

PR

Zip Code

00966

FEC ID number of contributing
federal political committee.

C

Name of Employer
Graphic PrintingOccupation
Printing Technician

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		20		2012

Transaction ID : SA11AI.4685

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Roberto H Baez Torres

Mailing Address Cond. Harbor Plaza Apt. # 105

105 Gilberto Concepcion de Gracia

City

San Juan

State

PR

Zip Code

00901

FEC ID number of contributing
federal political committee.

C

Name of Employer
unemployedOccupation
Retired

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		09		2012

Transaction ID : SA11AI.4260

Amount of Each Receipt this Period

500.00

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

1250.00

TOTAL 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 NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

Gisela Bello

A.

Mailing Address 8340 NW 115 Ct

City

Doral

State

PR

Zip Code

33178

FEC ID number of contributing
federal political committee.

C

Name of Employer
unemployedOccupation
Homemaker

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		24		2012

Transaction ID : SA11AI.4743

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Benjamin Betancourt Aquino

B.

Mailing Address 1501 Fernandez Juncos Ave.
Betancourt Bldg. Floor #4

City

San Juan

State

PR

Zip Code

00910

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Physician

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		23		2012

Transaction ID : SA11AI.4611

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Jose I. Blanco

C.

Mailing Address PO Box 191787

City

San Juan

State

PR

Zip Code

00919-1787

FEC ID number of contributing
federal political committee.

C

Name of Employer
Art Draft AuthorityOccupation
President

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		24		2012

Transaction ID : SA11AI.4829

Amount of Each Receipt this Period

300.00

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

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

900.00

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

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

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

A. Full Name (Last, First, Middle Initial) Alejandro Carrasco		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 24 / 2012	
Mailing Address Bahia 10286 Las Verandas		Transaction ID : SA11AI.4859	
City Rio Grande	State PR	Zip Code 00745	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer self employed		Occupation Attorney	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	
B. Full Name (Last, First, Middle Initial) Eric J. Carro Jimenez		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 24 / 2012	
Mailing Address Ext. Santa Maria 1913 Platanillo St.		Transaction ID : SA11AI.4751	
City San Juan	State PR	Zip Code 00917	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer self employed		Occupation Physician	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00	
C. Full Name (Last, First, Middle Initial) Antonio Casellas Fernandez		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 14 / 2012	
Mailing Address Estancias de Torrimar 65 Caoba St.		Transaction ID : SA11AI.4675	
City Guaynabo	State PR	Zip Code 00966	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer self employed		Occupation Attorney	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	
SUBTOTAL of Receipts This Page (optional).....		1800.00	
TOTAL 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 NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

Antonio Jose Casilas

Mailing Address Box 667

City

Humacao

State

PR

Zip Code

00792

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Physician

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		06		2012

Transaction ID : SA11AI.4679

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Hector Coto

Mailing Address PO Box 21094

City

San Juan

State

PR

Zip Code

00928-1094

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Physician

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		23		2012

Transaction ID : SA11AI.4621

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Rafael A. Cox Rosario

Mailing Address P.O. Box 366676

City

San Juan

State

PR

Zip Code

00936-6676

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.P.R School of MedicineOccupation
Physician

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		09		2012

Transaction ID : SA11AI.4264

Amount of Each Receipt this Period

2500.00

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

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

3800.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

Ivette Cruz Pagan

Mailing Address PO Box 6798

City

San Juan

State

PR

Zip Code

00914

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Physician

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		24		2012

Transaction ID : SA11AI.4747

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Jose Ramon Cumba

Mailing Address PO Box 130

City

Bayamon

State

PR

Zip Code

00960

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Physician

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		15		2012

Transaction ID : SA11AI.4673

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Efrain A. DefendiniMailing Address Isla Verde
Lirio St. # 2

City

Carolina

State

PR

Zip Code

00978

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Puerto RicoOccupation
Physician

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		13		2012

Transaction ID : SA11AI.4308

Amount of Each Receipt this Period

500.00

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

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

1800.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER:
 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 , INC.

A. Full Name (Last, First, Middle Initial) Juan R. Diaz Troche			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>11</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		11		2012
M M	/	D D	/	Y Y Y Y										
01		11		2012										
Mailing Address Road 351 # 3230			Transaction ID : SA11AI.4307											
City Mayaguez	State PR	Zip Code 00682	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>500.00</td> </tr> </table>							500.00				
					500.00									
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px;">C</div>														
Name of Employer self employed		Occupation Surgeon												
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>500.00</td> </tr> </table>								500.00				
					500.00									

B. Full Name (Last, First, Middle Initial) Juan R. Diaz Troche			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>19</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		19		2012
M M	/	D D	/	Y Y Y Y										
01		19		2012										
Mailing Address Road 351 # 3230			Transaction ID : SA11AI.4270											
City Mayaguez	State PR	Zip Code 00682	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>1000.00</td> </tr> </table>							1000.00				
					1000.00									
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px;">C</div>														
Name of Employer self employed		Occupation Surgeon												
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>1500.00</td> </tr> </table>								1500.00				
					1500.00									

C. Full Name (Last, First, Middle Initial) John Fehrenbach			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>19</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		19		2012
M M	/	D D	/	Y Y Y Y										
01		19		2012										
Mailing Address 2809 Valley Dr.			Transaction ID : SA11AI.4403											
City Alexandria	State VA	Zip Code 22302	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>500.00</td> </tr> </table>							500.00				
					500.00									
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px;">C</div>														
Name of Employer Winston Strawn		Occupation Attorney												
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>500.00</td> </tr> </table>								500.00				
					500.00									

SUBTOTAL of Receipts This Page (optional)			<table border="1"> <tr> <td colspan="5"></td> <td>2000.00</td> </tr> </table>							2000.00
					2000.00					
TOTAL This Period (last page this line number only)			<table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table>							

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

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

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

Roberto Galindez Feliciano

A.

Mailing Address Ave. Barbosa 115 altos

City

Catano

State

PR

Zip Code

00962

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Dentist

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2012

Transaction ID : SA11AI.4572

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Manuel Garcia Gonzalez

B.

Mailing Address P.O. Box 9024266

City

San Juan

State

PR

Zip Code

00902

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Businessman

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2012

Transaction ID : SA11AI.4496

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Luis I. Garcia Robaina

C.

Mailing Address Las Flores de Montehiedra
622 Miramelinda St.

City

San Juan

State

PR

Zip Code

00926

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hera PrintingOccupation
Businessman

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2012

Transaction ID : SA11AI.4576

Amount of Each Receipt this Period

500.00

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

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

1000.00

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

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

FOR LINE NUMBER:

PAGE 14 OF 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

Bryant Gardner

Mailing Address 1460 Church St. N.W.

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Winston and StrawnOccupation
Attorney

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		20		2012

Transaction ID : SA11AI.4940

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Miguel Girod

Mailing Address PO Box 190863

City

San Juan

State

PR

Zip Code

00919

FEC ID number of contributing
federal political committee.

C

Name of Employer
SpectrometrixOccupation
Seller - medical equipment

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2012

Transaction ID : SA11AI.4726

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Carlos E. Girod Morales

Mailing Address PO Box 13617

City

San Juan

State

PR

Zip Code

00908

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Physician

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2012

Transaction ID : SA11AI.4741

Amount of Each Receipt this Period

300.00

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

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

850.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

A. Full Name (Last, First, Middle Initial) Xavier Gonzalez Goenaga		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>03</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		03		2012
M M	/	D D	/	Y Y Y Y									
02		03		2012									
Mailing Address PO Box 364643		Transaction ID : SA11AI.4843											
City San Juan	State PR	Zip Code 00936-4643											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>1000.00</div>											
Name of Employer Fulcro	Occupation Insurance Broker												
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>1000.00</div>												
B. Full Name (Last, First, Middle Initial) Martin Gonzalez Luna		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>19</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		19		2012
M M	/	D D	/	Y Y Y Y									
02		19		2012									
Mailing Address Urb. Panorama A2 Calle 2		Transaction ID : SA11AI.4595											
City Bayamon	State PR	Zip Code 00957-4379											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>264.00</div>											
Name of Employer unemployed	Occupation Retired												
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>264.00</div>												
C. Full Name (Last, First, Middle Initial) Francisco Guerrero		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>24</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		24		2012
M M	/	D D	/	Y Y Y Y									
02		24		2012									
Mailing Address Pmb 357 200 Ave. Rafael Cordero Suite 140		Transaction ID : SA11AI.4738											
City Caguas	State PR	Zip Code 00725											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>300.00</div>											
Name of Employer self employed	Occupation Physician												
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>300.00</div>												
SUBTOTAL of Receipts This Page (optional).....		<div>1564.00</div>											
TOTAL This Period (last page this line number only).....		<div></div>											

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 , INC.

A. Full Name (Last, First, Middle Initial) Peter N. Hiebert		Date of Receipt M M / D D / Y Y Y Y 01 / 19 / 2012	
Mailing Address 3207 Rolling Rd PH 301		Transaction ID : SA11AI.4388	
City	State	Zip Code	
Chevy Chase	MD	20815-4035	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00	
Name of Employer Winston Strawn		Occupation Attorney	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	
B. Full Name (Last, First, Middle Initial) Jose R Huerta		Date of Receipt M M / D D / Y Y Y Y 02 / 23 / 2012	
Mailing Address Villas de San Francisco Street # 2 C-4		Transaction ID : SA11AI.4617	
City	State	Zip Code	
San Juan	PR	00927	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00	
Name of Employer self employed		Occupation Physician	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	
C. Full Name (Last, First, Middle Initial) Lawrence Kiern		Date of Receipt M M / D D / Y Y Y Y 01 / 30 / 2012	
Mailing Address 1477 Evans Farm Drive		Transaction ID : SA11AI.4944	
City	State	Zip Code	
Mc Lean	VA	22101-5655	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer Winston and Strawn		Occupation Attorney	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional).....		2250.00	
TOTAL This Period (last page this line number only).....		2250.00	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

A. Full Name (Last, First, Middle Initial) Chester Kwong		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>25</td> <td></td> <td>2012</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	01		25		2012
M M M	/	D D D	/	Y Y Y Y Y Y									
01		25		2012									
Mailing Address 2651 Ponte Vedra St.		Transaction ID : SA11AI.4462											
City Ponce	State PR	Zip Code 00716											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>250.00</div>											
Name of Employer self employed	Occupation Businessman												
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>250.00</div>												
B. Full Name (Last, First, Middle Initial) Stephan La Barbera Bailey		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>19</td> <td></td> <td>2012</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	01		19		2012
M M M	/	D D D	/	Y Y Y Y Y Y									
01		19		2012									
Mailing Address 1445 P St. NW Apt. 703		Transaction ID : SA11AI.4394											
City Washington	State WA	Zip Code 20005											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>250.00</div>											
Name of Employer Prime Policy Group	Occupation Director												
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>250.00</div>												
C. Full Name (Last, First, Middle Initial) Gilberto Lajara Castillo		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>19</td> <td></td> <td>2012</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	02		19		2012
M M M	/	D D D	/	Y Y Y Y Y Y									
02		19		2012									
Mailing Address Urb. Arboleda Robles St. E-13		Transaction ID : SA11AI.4857											
City Caguas	State PR	Zip Code 00727											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>900.00</div>											
Name of Employer Businessman	Occupation self-employed												
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>1337.74</div>												
SUBTOTAL of Receipts This Page (optional).....		<div>1400.00</div>											
TOTAL This Period (last page this line number only).....		<div></div>											

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

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

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

Fernando Lopez

A.

Mailing Address Plaza Scotiabank 1400

City

San Juan

State

PR

Zip Code

00917

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mass Mutual

Occupation

Insurance Broker

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		24		2012

Transaction ID : SA11AI.4929

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Pablo Lopez Huertas

B.

Mailing Address La Villa de Torrimar
298 Rey Felipe

City

Guaynabo

State

PR

Zip Code

00969

FEC ID number of contributing
federal political committee.

C

Name of Employer

Huertas Jr. College

Occupation

Civil Engineer

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		22		2012

Transaction ID : SA11AI.4694

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Carlos Lopez Rosario

C.

Mailing Address PO Box 8140

City

San Juan

State

PR

Zip Code

00910

FEC ID number of contributing
federal political committee.

C

Name of Employer

self employed

Occupation

Business

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		20		2012

Transaction ID : SA11AI.4564

Amount of Each Receipt this Period

250.00

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

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

800.00

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

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

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Ruben Marrero Vazquez

Mailing Address Parque Monte Bello C-7 Street 4

City

Trujillo Alto

State

PR

Zip Code

00976

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Painter

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2012

Transaction ID : SA11AI.4753

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Jose A. Martinez

Mailing Address Cond. Los Olmos Apt. # 6K
Nevarez St.

City

San Juan

State

PR

Zip Code

00927

FEC ID number of contributing
federal political committee.

C

Name of Employer
unemployedOccupation
Retired

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		09		2012

Transaction ID : SA11AI.4262

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Edgardo Medina Barcelo

Mailing Address PO Box 363745

City

San Juan

State

PR

Zip Code

00936-3745

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Insurance Agent

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2012

Transaction ID : SA11AI.4831

Amount of Each Receipt this Period

300.00

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

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

1100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

A. Full Name (Last, First, Middle Initial) Rosadela Medina de Garity			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>16</td> <td></td> <td>2012</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	02		16		2012
M M M	/	D D D	/	Y Y Y Y Y Y										
02		16		2012										
Mailing Address Atalaya St. D-11			Transaction ID : SA11AI.4605											
City	State	Zip Code												
Guaynabo St.	PR	00966												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">1000.00</td> </tr> </table>		1000.00									
1000.00														
Name of Employer unemployed		Occupation Homemaker												
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">1000.00</td> </tr> </table>	1000.00											
1000.00														

B. Full Name (Last, First, Middle Initial) Thomas L. Mills			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>19</td> <td></td> <td>2012</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	01		19		2012
M M M	/	D D D	/	Y Y Y Y Y Y										
01		19		2012										
Mailing Address 643 Ranger Court			Transaction ID : SA11AI.4396											
City	State	Zip Code												
Davidsonville	MD	21035												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>		250.00									
250.00														
Name of Employer Winston Strawn		Occupation Attorney												
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>	250.00											
250.00														

C. Full Name (Last, First, Middle Initial) Luis Molinary Fernandez			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>24</td> <td></td> <td>2012</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	02		24		2012
M M M	/	D D D	/	Y Y Y Y Y Y										
02		24		2012										
Mailing Address Monte Verde Real 8 Calle Vereda			Transaction ID : SA11AI.4730											
City	State	Zip Code												
San Juan	PR	00926												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">300.00</td> </tr> </table>		300.00									
300.00														
Name of Employer self employed		Occupation Physician												
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">300.00</td> </tr> </table>	300.00											
300.00														

SUBTOTAL of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5">1550.00</td> </tr> </table>		1550.00				
1550.00									
TOTAL This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> </tr> </table>						

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 , INC.

A. Full Name (Last, First, Middle Initial) Charles B. Molster III			Date of Receipt M M / D D / Y Y Y Y 01 / 18 / 2012	
Mailing Address 815 Blacks Hill RD.			Transaction ID : SA11AI.4382	
City	State	Zip Code		
Great Falls	VA	22066-1301		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 250.00	
Name of Employer Winston Strawn		Occupation Attorney		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
B. Full Name (Last, First, Middle Initial) Raul Monteagudo			Date of Receipt M M / D D / Y Y Y Y 02 / 24 / 2012	
Mailing Address PMB 272 5900 Isla Verde Ave.			Transaction ID : SA11AI.4728	
City	State	Zip Code		
Carolina	PR	00979		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 300.00	
Name of Employer self employed		Occupation Engineer		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00		
C. Full Name (Last, First, Middle Initial) Gerald A. Morrissey III			Date of Receipt M M / D D / Y Y Y Y 01 / 19 / 2012	
Mailing Address 423 M St. NE			Transaction ID : SA11AI.4400	
City	State	Zip Code		
Washington	DC	20002		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 250.00	
Name of Employer Winston Strawn		Occupation Attorney		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
SUBTOTAL of Receipts This Page (optional).....			800.00	
TOTAL 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 NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

James S Normile

A.

Mailing Address 220 Byram Lake Rd.

City

Bedford Corners

State

NY

Zip Code

10549

FEC ID number of contributing
federal political committee.

C

Name of Employer
Winston and StrawnOccupation
Attorney

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		20		2012

Transaction ID : SA11AI.4942

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Jorge Ortega Gil

B.

Mailing Address San Francisco
1674 Verhens St.

City

San Juan

State

PR

Zip Code

00927

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

372.25

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		23		2012

Transaction ID : SA11AI.4826

Amount of Each Receipt this Period

372.25

In-kind - Fundraising activity - expenses

Full Name (Last, First, Middle Initial)

Luis Ortiz Lugo

C.

Mailing Address Bo. Barrancas 3 St. # 157

City

Guayama

State

PR

Zip Code

00784

FEC ID number of contributing
federal political committee.

C

Name of Employer
AAAOccupation
Manager

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		26		2012

Transaction ID : SA11AI.4880

Amount of Each Receipt this Period

250.00

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

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

1122.25

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

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

FOR LINE NUMBER:

PAGE 23 OF 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Martin P. Paone

Mailing Address 11282 Spyglass Lane

City

Reston

State

VA

Zip Code

20191

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Policy Group

Occupation

Executive Vice President

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		18		2012

Transaction ID : SA11AI.4844

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. George Perez Borrero

Mailing Address PO Box 1866

City

Luquillo

State

PR

Zip Code

00773

FEC ID number of contributing
federal political committee.

C

Name of Employer

self employed

Occupation

Accountant

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2012

Transaction ID : SA11AI.4615

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Ricardo Perez Borrero

Mailing Address Urb. Garcia Ponce B-13

City

Fajardo

State

PR

Zip Code

00738

FEC ID number of contributing
federal political committee.

C

Name of Employer

self employed

Occupation

Administrator

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2012

Transaction ID : SA11AI.4620

Amount of Each Receipt this Period

600.00

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

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

1400.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

Edwin Perez Marrero

Mailing Address PO Box 34903

City

San Juan

State

PR

Zip Code

00936

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Physician

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		24		2012

Transaction ID : SA11AI.4724

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Orlando J. Perez RodriguezMailing Address Villas de Parana
S8-15 Street 8

City

San Juan

State

PR

Zip Code

00926

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Physician

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		24		2012

Transaction ID : SA11AI.4732

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Victor E. Portugues

Mailing Address Dorado Beach E # 191

City

Dorado

State

PR

Zip Code

00646

FEC ID number of contributing
federal political committee.

C

Name of Employer
self-employedOccupation
Businessman

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		10		2012

Transaction ID : SA11AI.4268

Amount of Each Receipt this Period

2500.00

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

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

3100.00

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

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

FOR LINE NUMBER:

PAGE 25 OF 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Jose E Quinones Archilla

Mailing Address Cond Plaza Imaculada Apt. 90
 1717 Ponce de Leon Ave.

City	State	Zip Code
San Juan	PR	00909

FEC ID number of contributing federal political committee.

C

Name of Employer
 self employed

Occupation
 Financial Consultant

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		24		2012

Transaction ID : SA11AI.4745

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Amilcar Ramirez

Mailing Address Ponce de Leon Ave. Parada 22
 Apt.# 177

City	State	Zip Code
San Juan	PR	00901

FEC ID number of contributing federal political committee.

C

Name of Employer
 self employed

Occupation
 Publicist

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

270.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		21		2012

Transaction ID : SA11AI.4916

Amount of Each Receipt this Period

270.00

In-kind - stage for fundraising event

Full Name (Last, First, Middle Initial)

C. Nyrsa Ramos Perez

Mailing Address San Pedro States
 C-15 San Ignacio

City	State	Zip Code
Caguas	PR	00725

FEC ID number of contributing federal political committee.

C

Name of Employer
 self employed

Occupation
 Education Consultant

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		21		2012

Transaction ID : SA11AI.4587

Amount of Each Receipt this Period

250.00

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

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

820.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 26 OF 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

Jose Reyes

Mailing Address Hacienda El Molino

12 Paseo Madrid

City

Vega Alta

State

PR

Zip Code

00692

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Physician

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		24		2012

Transaction ID : SA11AI.4755

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Jose Carlos Reyes Pena

Mailing Address Haciendas el Molino

12 Paseo Madrid

City

Vega Alta

State

PR

Zip Code

00692

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Physician

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		24		2012

Transaction ID : SA11AI.4855

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Alejandro Riera

Mailing Address Urb. Miraville

Moradilla St. B-1

City

San Juan

State

PR

Zip Code

00926

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Businessman

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		28		2012

Transaction ID : SA11AI.4861

Amount of Each Receipt this Period

500.00

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

1100.00

TOTAL 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 NUMBER:

PAGE 27 OF 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

Felix Rios

A.

Mailing Address Paseo Alto 27 Calle 2

City

San Juan

State

PR

Zip Code

00926

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Physician

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		24		2012

Transaction ID : SA11AI.4736

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Myriam Rivera

B.

Mailing Address Road 165 #100 Suite 512

City

Guaynabo

State

PR

Zip Code

00968

FEC ID number of contributing
federal political committee.

C

Name of Employer
Central 12Occupation
Administrator

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		21		2012

Transaction ID : SA11AI.4913

Amount of Each Receipt this Period

2500.00

In-kind - catering costs for fundraising event

Full Name (Last, First, Middle Initial)

Mae Rivera Janer

C.

Mailing Address 554 Perseo St. Apt 1101

City

San Juan

State

PR

Zip Code

00920

FEC ID number of contributing
federal political committee.

C

Name of Employer
unemployedOccupation
Homemaker

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		24		2012

Transaction ID : SA11AI.4718

Amount of Each Receipt this Period

300.00

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

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

3100.00

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

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

FOR LINE NUMBER:

PAGE 28 OF 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Flavia Rivera Moreno

Mailing Address Cond. Las Americas Park I Apt.1504

920 Jesus T Pinero

City

San Juan

State

PR

Zip Code

00921-1910

FEC ID number of contributing
federal political committee.

C

Name of Employer

Casa Productora Latitud

Occupation

Office Manager

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2012

Transaction ID : SA11AI.4578

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Hector Rodriguez

Mailing Address PO Box 224

City

Salinas

State

PR

Zip Code

00751

FEC ID number of contributing
federal political committee.

C

Name of Employer

Triple S

Occupation

Vice President - Quality

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

488.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2012

Transaction ID : SA11AI.4998

Amount of Each Receipt this Period

488.05

In-kind - catering costs for fundraising activities

Full Name (Last, First, Middle Initial)

C. Carlos Rodriguez del Valle

Mailing Address Hacienda San Jose

813 Via Primavera

City

Caguas

State

PR

Zip Code

00727

FEC ID number of contributing
federal political committee.

C

Name of Employer

self employed

Occupation

Physician

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2012

Transaction ID : SA11AI.4749

Amount of Each Receipt this Period

300.00

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

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

1038.05

Diagram illustrating the layout of the numbered boxes on the table:

- Box 11a is at the top left, with box 12 below it.
- Box 11b is to the right of 11a, with box 13a below it.
- Box 11c is to the right of 11b, with box 13b below it.
- Box 11d is to the right of 11c, with box 14 below it.
- Box 15 is to the right of box 14.

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 , INC.

FEC Schedule A (Form 3) (Revised 02/2009)

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

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

FOR LINE NUMBER:

PAGE 30 OF 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

Roberto Ruiz Lopez

A.

Mailing Address PO Box 366512

City

San Juan

State

PR

Zip Code

00936

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Physician

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2012

Transaction ID : SA11AI.4607

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Carlos Salgado Bravo

B.

Mailing Address P.O. Box 560

City

Arecibo

State

PR

Zip Code

00613

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Attorney

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2012

Transaction ID : SA11AI.4460

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Jorge L. Sanchez Colon

C.

Mailing Address Chalets de Snata Maria # 24

City

San Juan

State

PR

Zip Code

00927

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employedOccupation
Physician

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2012

Transaction ID : SA11AI.4677

Amount of Each Receipt this Period

1000.00

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

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

1550.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 31 OF 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Jorge Sanders

Mailing Address Villa Caparra Genova B-9

City

Guaynabo

State

PR

Zip Code

00966

FEC ID number of contributing
federal political committee.

C

Name of Employer
unemployedOccupation
student

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2012

Transaction ID : SA11AI.4981

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Maria L. Santaella Arguinizoni

Mailing Address PO Box 366676

City

San Juan

State

PR

Zip Code

00936

FEC ID number of contributing
federal political committee.

C

Name of Employer
unemployedOccupation
Retired

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

338.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2012

Transaction ID : SA11AI.4849

Amount of Each Receipt this Period

192.59

In-kind - water cooler

Full Name (Last, First, Middle Initial)

C. Maria L. Santaella Arguinizoni

Mailing Address PO Box 366676

City

San Juan

State

PR

Zip Code

00936

FEC ID number of contributing
federal political committee.

C

Name of Employer
unemployedOccupation
Retired

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

523.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2012

Transaction ID : SA11AI.4851

Amount of Each Receipt this Period

184.62

In-kind - office supplies

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

677.21

TOTAL 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 NUMBER:

PAGE 32 OF 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

A. Full Name (Last, First, Middle Initial)
Maria L. Santaella Arguinizoni

Mailing Address PO Box 366676

City	State	Zip Code
San Juan	PR	00936

FEC ID number of contributing federal political committee.

C

Name of Employer
unemployedOccupation
Retired

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

593.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2012

Transaction ID : SA11AI.4853

Amount of Each Receipt this Period

70.46

In-kind - office supplies

B. Full Name (Last, First, Middle Initial)
Maria L. Santaella Arguinizoni

Mailing Address PO Box 366676

City	State	Zip Code
San Juan	PR	00936

FEC ID number of contributing federal political committee.

C

Name of Employer
unemployedOccupation
Retired

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1293.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2012

Transaction ID : SA11AI.4823

Amount of Each Receipt this Period

700.02

In-kind - Fundraising activity - expenses

C. Full Name (Last, First, Middle Initial)
Daniel Santos

Mailing Address 1621 Fremont Lane

City	State	Zip Code
Vienna	VA	22182

FEC ID number of contributing federal political committee.

C

Name of Employer
Nuclear Regulatory CommissionOccupation
Engineer

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2012

Transaction ID : SA11AI.4985

Amount of Each Receipt this Period

1000.00

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

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

1770.48

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

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

FOR LINE NUMBER:

PAGE 33 OF 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

James P. Smith

A.

Mailing Address 3339 Stephenson Place NW

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing
federal political committee.

C

Name of Employer

SDA Global

Occupation

Lobbyist

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		19		2012

Transaction ID : SA11AI.4374

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Margarita Suarez

B.

Mailing Address Washington St. #57 2nd floor

City

San Juan

State

PR

Zip Code

00907

FEC ID number of contributing
federal political committee.

C

Name of Employer

University

Occupation

student

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		25		2012

Transaction ID : SA11AI.4498

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Edmee Torres Olivo

C.

Mailing Address Urb. Monte Claro
Mk 36 Plaza 40

City

Bayamon

State

PR

Zip Code

00961

FEC ID number of contributing
federal political committee.

C

Name of Employer

Timing

Occupation

Businessman

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		17		2012

Transaction ID : SA11AI.4593

Amount of Each Receipt this Period

500.00

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

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

1250.00

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

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

FOR LINE NUMBER:

PAGE 34 OF 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Jose Vargas

Mailing Address PO Box 6030 PMB 132

City
Carolina

State
PR

Zip Code
00984

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employed

Occupation
Biologist

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		25		2012

Transaction ID : SA11AI.4983

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Silvio Velez Estrada

Mailing Address Terrazas de Parque Escorial
Apt. 5411

City
Carolina

State
PR

Zip Code
00987

FEC ID number of contributing
federal political committee.

C

Name of Employer
Instituto de Medicina Pediatri

Occupation
Physician

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		21		2012

Transaction ID : SA11AI.4538

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Enrique A Vera Sanchez

Mailing Address El Remanso
Arroyo St. A-11

City
San Juan

State
PR

Zip Code
00926

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employed

Occupation
Physician

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		24		2012

Transaction ID : SA11AI.4932

Amount of Each Receipt this Period

250.00

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

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

750.00

✕	11a		11b		11c		11d	
	12		13a		13b		14	15

FEC Schedule A (Form 3) (Revised 02/2009)

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

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

FOR LINE NUMBER:

PAGE 36 OF 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

John A. Waits

Mailing Address 6609 Persimmon Tree Rd.

City

Cabin John

State

MD

Zip Code

20818-1217

FEC ID number of contributing
federal political committee.

C

Name of Employer

Winston Strawn

Occupation

Attorney

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		19		2012

Transaction ID : SA11AI.4384

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Paul Weiss

Mailing Address 5343 32nd St.NW

City

Washington

State

DC

Zip Code

20015-1359

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Policy Group

Occupation

Director

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		19		2012

Transaction ID : SA11AI.4392

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

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

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

1100.00

46461.45

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

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

FOR LINE NUMBER:
(check only one)

PAGE 37 OF 63

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

A.

Full Name (Last, First, Middle Initial)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Mailing Address 1625 L STREET NW

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C C00011114

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 23 2012

Transaction ID : SA11C.4891

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

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

Amount of Each Receipt this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

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

Amount of Each Receipt this Period

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

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

1000.00

1000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 63

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

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Sami Abu OsbaMailing Address Urb. San Agustin
1426 Luisa Capetilo St.City State Zip Code
San Juan PR 00921Purpose of Disbursement
gasoline expense for campaign vehicleCandidate Name
COX ALOMAR 2012 , INC.Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	D D	Y Y Y Y
01	15	2012

Amount of Each Disbursement this Period

666.38

Transaction ID : SB17.4772

B. Sami Abu OsbaMailing Address Urb. San Agustin
1426 Luisa Capetilo St.City State Zip Code
San Juan PR 00921Purpose of Disbursement
gasoline expense for campaign vehicleCandidate Name
COX ALOMAR 2012 , INC.Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	D D	Y Y Y Y
02	13	2012

Amount of Each Disbursement this Period

781.65

Transaction ID : SB17.4773

c. Hilda AcevedoMailing Address Parque del Sol
Theves St. A-14City State Zip Code
Bayamon PR 00959Purpose of Disbursement
In-kind - beverages for fundraising event

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	21	2012

Amount of Each Disbursement this Period

209.46

Transaction ID : SB17.4927

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

1657.49

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 63

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

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Carmen E. Acevedo BetancourtMailing Address Urb. Roosevelt
Canals St. #451

City San Juan State PR Zip Code 00918

Purpose of Disbursement
communication consulting services

Candidate Name

COX ALOMAR 2012 , INC.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	D D	Y Y Y Y
02	10	2012

Amount of Each Disbursement this Period

1400.00

Transaction ID : SB17.4783

B. Marilyn Almodovar Ponce

Mailing Address Cond. Alborada Apt. 3732

City San Juan State PR Zip Code 00959

Purpose of Disbursement
public relations professional services

Candidate Name

COX ALOMAR 2012 , INC.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	D D	Y Y Y Y
02	10	2012

Amount of Each Disbursement this Period

1400.00

Transaction ID : SB17.4781

c. Rafael Alomar ColonMailing Address Cond. Vista Verde Apt. 601
San Ignacio Ave.

City San Juan State PR Zip Code 00921

Purpose of Disbursement
fluorescent lamps replacement/installation

Candidate Name

COX ALOMAR 2012 , INC.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	D D	Y Y Y Y
02	13	2012

Amount of Each Disbursement this Period

609.00

Transaction ID : SB17.4779

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

3409.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 63

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

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Rafael Alomar ColonMailing Address Cond. Vista Verde Apt. 601
San Ignacio Ave.

City San Juan State PR Zip Code 00921

Purpose of Disbursement
In-kind - for installation of lamps in office area

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2012

Amount of Each Disbursement this Period

210.00

Transaction ID : SB17.4796

B. Manuel E. Avila De Jesus

Mailing Address P. O. Box 8155

City San Juan State PR Zip Code 00910-0155

Purpose of Disbursement
reimbursement for office supplies

Candidate Name

COX ALOMAR 2012 , INC.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2012

Amount of Each Disbursement this Period

251.04

Transaction ID : SB17.4816

c. Manuel E. Avila De Jesus

Mailing Address P. O. Box 8155

City San Juan State PR Zip Code 00910-0155

Purpose of Disbursement
reimbursement for taxi expense

Candidate Name

COX ALOMAR 2012 , INC.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2012

Amount of Each Disbursement this Period

110.00

Transaction ID : SB17.4817

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

571.04

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 63

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

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Manuel E. Avila De Jesus

Mailing Address P. O. Box 8155

City
San JuanState
PRZip Code
00910-0155Purpose of Disbursement
reimbursement for office supplies and equipment

001

Category/
Type

Candidate Name

COX ALOMAR 2012 , INC.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		11		2012

Amount of Each Disbursement this Period

249.83

Transaction ID : SB17.4818

B. Caguas Expressway Motors

Mailing Address P.O Box 50045

City
San JuanState
PRZip Code
00902Purpose of Disbursement
campaign vehicle rental

002

Category/
Type

Candidate Name

COX ALOMAR 2012 , INC.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		09		2012

Amount of Each Disbursement this Period

1650.00

Transaction ID : SB17.4836

c. Caguas Expressway Motors

Mailing Address P.O Box 50045

City
San JuanState
PRZip Code
00902Purpose of Disbursement
Campaign vehicle rental

002

Category/
Type

Candidate Name

COX ALOMAR 2012 , INC.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		09		2012

Amount of Each Disbursement this Period

1650.00

Transaction ID : SB17.4898

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

3549.83

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Luis Calderon Navarro

Mailing Address PO Box 315

City	State	Zip Code
Loiza	PR	00772

Purpose of Disbursement
reimbursement for taxi expense = Washington

002

Candidate Name

COX ALOMAR 2012 , INC.Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2012

Amount of Each Disbursement this Period

70.00

Transaction ID : SB17.4812

B. Luis Calderon Navarro

Mailing Address PO Box 315

City	State	Zip Code
Loiza	PR	00772

Purpose of Disbursement
meals for campaign escorts

007

Candidate Name

COX ALOMAR 2012 , INC.Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2012

Amount of Each Disbursement this Period

220.00

Transaction ID : SB17.4801

c. Luis Calderon Navarro

Mailing Address PO Box 315

City	State	Zip Code
Loiza	PR	00772

Purpose of Disbursement
reimbursement for hotel room - campaign activity

002

Candidate Name

COX ALOMAR 2012 , INC.Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2012

Amount of Each Disbursement this Period

130.80

Transaction ID : SB17.4800

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

420.80

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Luis Calderon Navarro

Mailing Address PO Box 315

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		08		2012

City	State	Zip Code
Loiza	PR	00772

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement
gasoline expense for campaign vehicle

002

Transaction ID : SB17.4802

Candidate Name

COX ALOMAR 2012 , INC.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Full Name (Last, First, Middle Initial)

B. Luis Calderon Navarro

Mailing Address PO Box 315

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		16		2012

City	State	Zip Code
Loiza	PR	00772

Amount of Each Disbursement this Period

90.00

Purpose of Disbursement
expense for meals - campaign volunteers

007

Transaction ID : SB17.4803

Candidate Name

COX ALOMAR 2012 , INC.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Full Name (Last, First, Middle Initial)

C. Luis Calderon Navarro

Mailing Address PO Box 315

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2012

City	State	Zip Code
Loiza	PR	00772

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement
purchase of campaign materials

006

Transaction ID : SB17.4804

Candidate Name

COX ALOMAR 2012 , INC.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

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

240.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Luis Calderon Navarro

Mailing Address PO Box 315

City	State	Zip Code
Loiza	PR	00772

Purpose of Disbursement
gasoline expense for campaign vehicle

002

Candidate Name

COX ALOMAR 2012 , INC.Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2012

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4805

B. Luis Calderon Navarro

Mailing Address PO Box 315

City	State	Zip Code
Loiza	PR	00772

Purpose of Disbursement
meals expense for campaign volunteers

007

Candidate Name

COX ALOMAR 2012 , INC.Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2012

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4806

C. Luis Calderon Navarro

Mailing Address PO Box 315

City	State	Zip Code
Loiza	PR	00772

Purpose of Disbursement
meals expense for campaign volunteers

007

Candidate Name

COX ALOMAR 2012 , INC.Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2012

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4807

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

300.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Luis Calderon Navarro

Mailing Address PO Box 315

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2012

City	State	Zip Code
Loiza	PR	00772

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement
gasoline expense for campaign vehicle

002

Transaction ID : SB17.4808

Candidate Name

COX ALOMAR 2012 , INC.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Full Name (Last, First, Middle Initial)

B. Pedro Clemente QuinonesMailing Address Urb. Country Club
1100 Carmen Busello St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		12		2012

City	State	Zip Code
San Juan	PR	00924

Amount of Each Disbursement this Period

916.67

Purpose of Disbursement
debt payment for campaign jingle

004

Transaction ID : SB17.4833

Candidate Name

COX ALOMAR 2012 , INC.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Full Name (Last, First, Middle Initial)

c. Pedro Clemente QuinonesMailing Address Urb. Country Club
1100 Carmen Busello St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		26		2012

City	State	Zip Code
San Juan	PR	00924

Amount of Each Disbursement this Period

966.67

Purpose of Disbursement
debt payment for campaign jingle

004

Transaction ID : SB17.4834

Candidate Name

COX ALOMAR 2012 , INC.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

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

1983.34

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Pedro Clemente QuinonesMailing Address Urb. Country Club
1100 Carmen Busello St.

City San Juan State PR Zip Code 00924

Purpose of Disbursement
debt payment for campaign jingle

Candidate Name

COX ALOMAR 2012 , INC.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	D D	Y Y Y Y
02	11	2012

Amount of Each Disbursement this Period

966.67

Transaction ID : SB17.4835

B. Grupo Musical Doble Contacto

Mailing Address HC02 Box 17000

City Arecibo State PR Zip Code 00612

Purpose of Disbursement
Music for fundraising event

Candidate Name

COX ALOMAR 2012 , INC.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	D D	Y Y Y Y
02	25	2012

Amount of Each Disbursement this Period

375.00

Transaction ID : SB17.4907

c. Happy Productions

Mailing Address PO Box 19569

City San Juan State PR Zip Code 00910-1569

Purpose of Disbursement
Theater space rental for candidate presentation activity

Candidate Name

COX ALOMAR 2012 , INC.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	D D	Y Y Y Y
02	26	2012

Amount of Each Disbursement this Period

1350.00

Transaction ID : SB17.4903

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

2691.67

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Gilberto Lajara CastilloMailing Address Urb. Arboleda
Robles St. E-13

City Caguas State PR Zip Code 00727

Purpose of Disbursement
In-kind - catering costs for fundraising activity

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2012

Amount of Each Disbursement this Period

900.00

Transaction ID : SB17.4858

B. Luis E. Matos Hicks

Mailing Address 1916 Loiza Street 2nd floor

City San Juan State PR Zip Code 00911

Purpose of Disbursement
photos of campaign activity

Candidate Name

COX ALOMAR 2012 , INC.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		09		2012

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.4766

c. Nostrom Moving Images

Mailing Address 909 Calle Escorial #1

City San Juan State PR Zip Code 00920-2008

Purpose of Disbursement
Photos for campaign activities

Candidate Name

COX ALOMAR 2012 , INC.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2012

Amount of Each Disbursement this Period

6273.75

Transaction ID : SB17.4790

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

7473.75

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Office Max

Mailing Address # 9 Los Frailes Ind. Park

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		08		2012

City	State	Zip Code
Guaynabo	PR	00969

Amount of Each Disbursement this Period

652.68

Purpose of Disbursement
Computer and Flexi File

001

Transaction ID : SB17.4759

Candidate Name

COX ALOMAR 2012 , INC.Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Full Name (Last, First, Middle Initial)

B. One Link Communications

Mailing Address PO Box 192296

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		07		2012

City	State	Zip Code
San Juan	PR	00919-2296

Amount of Each Disbursement this Period

591.00

Purpose of Disbursement
telephone services expense

001

Transaction ID : SB17.4761

Candidate Name

COX ALOMAR 2012 , INC.Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Full Name (Last, First, Middle Initial)

c. One Link Communications

Mailing Address PO Box 192296

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		07		2012

City	State	Zip Code
San Juan	PR	00919-2296

Amount of Each Disbursement this Period

72.35

Purpose of Disbursement
telephone services expense

001

Transaction ID : SB17.4763

Candidate Name

COX ALOMAR 2012 , INC.Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

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

1316.03

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Jorge Ortega GilMailing Address San Francisco
1674 Verhens St.

City San Juan State PR Zip Code 00927

Purpose of Disbursement
In-kind - Fundraising activity - expenses

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		23		2012

Amount of Each Disbursement this Period

372.25

Transaction ID : SB17.4828

B. Nereida Ortiz Vazquez

Mailing Address PO Box 194555

City San Juan State PR Zip Code 00919

Purpose of Disbursement
reimbursement for hotel room - campaign activity Ponce

Candidate Name

COX ALOMAR 2012 , INC.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		23		2012

Amount of Each Disbursement this Period

343.35

Transaction ID : SB17.4814

c. Paper Tree Office Supplies

Mailing Address Almendros St. C-3 Villa Hucar

City San Juan State PR Zip Code 00926

Purpose of Disbursement
Office furniture

Candidate Name

COX ALOMAR 2012 , INC.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		23		2012

Amount of Each Disbursement this Period

545.53

Transaction ID : SB17.4768

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

1261.13

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Partido Popular Democratico Inc.

Mailing Address 403 Constitucion Ave.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		09		2012

City	State	Zip Code
San Juan	PR	00906

Amount of Each Disbursement this Period

1900.00

Purpose of Disbursement
Office space rental

001

Transaction ID : SB17.4895

Candidate Name

COX ALOMAR 2012 , INC.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Full Name (Last, First, Middle Initial)

B. Amilcar RamirezMailing Address Ponce de Leon Ave. Parada 22
Apt.# 177

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		21		2012

City	State	Zip Code
San Juan	PR	00901

Amount of Each Disbursement this Period

270.00

Purpose of Disbursement
In-kind - stage for fundraising eventCategory/
Type

Transaction ID : SB17.4918

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Jose Rivera

Mailing Address Santa Elena St # 9 A-2

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		12		2012

City	State	Zip Code
San Juan	PR	00957

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
telephones installations

001

Transaction ID : SB17.4785

Candidate Name

COX ALOMAR 2012 , INC.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

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

2670.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Myriam Rivera

Mailing Address Road 165 #100 Suite 512

City	State	Zip Code
Guaynabo	PR	00968

Purpose of Disbursement
In-kind - catering costs for fundraising event

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		21		2012

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.4915

B. Hector Rodriguez

Mailing Address PO Box 224

City	State	Zip Code
Salinas	PR	00751

Purpose of Disbursement
In-kind - catering costs for fundraising activities

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		26		2012

Amount of Each Disbursement this Period

488.05

Transaction ID : SB17.4999

C. Jaime Luis Sanabria Montanez

Mailing Address P.O. Box 367921

City	State	Zip Code
San Juan	PR	00936-7921

Purpose of Disbursement
reimbursement for airline tickets - Washington

Candidate Name

COX ALOMAR 2012 , INC.

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		16		2012

Amount of Each Disbursement this Period

621.40

Transaction ID : SB17.4813

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

3609.45

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Jaime Luis Sanabria Montanez

Mailing Address P.O. Box 367921

City
San JuanState
PRZip Code
00936-7921Purpose of Disbursement
reimbursement for hotel room - Washington

002

Candidate Name

COX ALOMAR 2012 , INC.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: PR

District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2012

Amount of Each Disbursement this Period

1080.91

Transaction ID : SB17.4810

B. Jaime Luis Sanabria Montanez

Mailing Address P.O. Box 367921

City
San JuanState
PRZip Code
00936-7921Purpose of Disbursement
reimbursement for meals - Washington

002

Candidate Name

COX ALOMAR 2012 , INC.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: PR

District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2012

Amount of Each Disbursement this Period

156.00

Transaction ID : SB17.4811

c. Maria L. Santaella Arguinizoni

Mailing Address PO Box 366676

City
San JuanState
PRZip Code
00936Purpose of Disbursement
In-kind - water coolerCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		16		2012

Amount of Each Disbursement this Period

192.59

Transaction ID : SB17.4850

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

1429.50

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 53 OF 63

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Maria L. Santaella Arguinizoni

Mailing Address PO Box 366676

City	State	Zip Code
San Juan	PR	00936

Purpose of Disbursement
In-kind - office supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2012

Amount of Each Disbursement this Period

184.62

Transaction ID : SB17.4852

B. Maria L. Santaella Arguinizoni

Mailing Address PO Box 366676

City	State	Zip Code
San Juan	PR	00936

Purpose of Disbursement
In-kind - office supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2012

Amount of Each Disbursement this Period

70.46

Transaction ID : SB17.4854

c. Maria L. Santaella Arguinizoni

Mailing Address PO Box 366676

City	State	Zip Code
San Juan	PR	00936

Purpose of Disbursement
In-kind - Fundraising activity - expenses

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2012

Amount of Each Disbursement this Period

700.02

Transaction ID : SB17.4825

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

955.10

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Jose I. TorresMailing Address HC07 Box 70574
Bo.Calabazas

City San Sebastian State PR Zip Code 00685

Purpose of Disbursement
Artistic show for Fund Raising eventCandidate Name
COX ALOMAR 2012 , INC.Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2012 ☒ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	D D	Y Y Y Y
02	25	2012

Amount of Each Disbursement this Period

400.00

Transaction ID : SB17.4905

B. Unlimited Print

Mailing Address De Diego Ave. #765

City San Juan State PR Zip Code 00921

Purpose of Disbursement
T-shirts printingCandidate Name
COX ALOMAR 2012 , INC.Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	D D	Y Y Y Y
01	05	2012

Amount of Each Disbursement this Period

227.91

Transaction ID : SB17.4764

c. Vias Car Rental of PR

Mailing Address Isla Verde

City Carolina State PR Zip Code 00979

Purpose of Disbursement
vehicle rentalCandidate Name
COX ALOMAR 2012 , INC.Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Date of Disbursement

M M	D D	Y Y Y Y
01	27	2012

Amount of Each Disbursement this Period

509.50

Transaction ID : SB17.4770

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

1137.41

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

Full Name (Last, First, Middle Initial)

A. Wave Ranch Inc.

Mailing Address HC 72 Box 3766 PMB 323

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2012

City	State	Zip Code
Naranjito	PR	00719-9788

Amount of Each Disbursement this Period

Purpose of Disbursement
T-shirts and polo printing

007

Transaction ID : SB17.4774

Candidate Name

COX ALOMAR 2012 , INC.Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Full Name (Last, First, Middle Initial)

B. Wave Ranch Inc.

Mailing Address HC 72 Box 3766 PMB 323

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		09		2012

City	State	Zip Code
Naranjito	PR	00719-9788

Amount of Each Disbursement this Period

Purpose of Disbursement
T-shirts and polo printing

007

Transaction ID : SB17.4776

Candidate Name

COX ALOMAR 2012 , INC.Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: PR District: 01

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

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

2027.65

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

36703.19

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 58 OF 63

FOR LINE NUMBER:
(check only one)☒ 9
☐ 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

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

Pedro Clemente QuinonesNature of Debt (Purpose):
overpaymentMailing Address Urb. Country Club
1100 Carmen Busello St.City State Zip Code
San Juan PR 00924

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD9.4979

Amount Incurred This Period

100.01

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 Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

100.01

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

100.01

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

0.00

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

100.01

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 59 OF 63

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

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

Carmen E. Acevedo Betancourt

Nature of Debt (Purpose):

Communications consulting services

Mailing Address Urb. Roosevelt
Canals St. #451City State Zip Code
San Juan PR 00918

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4964

Amount Incurred This Period

1400.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1400.00

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

Marilyn Almodovar Ponce

Nature of Debt (Purpose):

Public Relation Services

Mailing Address Cond. Alborada Apt. 3732

City State Zip Code
San Juan PR 00959

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4963

Amount Incurred This Period

1400.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1400.00

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

Caguas Expressway Motors

Nature of Debt (Purpose):

Car Rental

Mailing Address P.O Box 50045

City State Zip Code
San Juan PR 00902

Outstanding Balance Beginning This Period

1650.00

Transaction ID : SD10.4218

Amount Incurred This Period

0.00

Payment This Period

1650.00

Outstanding Balance at Close of This Period

0.00

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

2800.00

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

0.00

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 60 OF 63

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

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

Caguas Expressway Motors

Nature of Debt (Purpose):

Campaign vehicle rental

Mailing Address P.O Box 50045

City State

Zip Code

San Juan

PR

00902

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4897

Amount Incurred This Period

3300.00

Payment This Period

1650.00

Outstanding Balance at Close of This Period

1650.00

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

Central 12

Nature of Debt (Purpose):

Campaign Media and Promotion

Mailing Address Centro Intl de Mercadeo Torre 1
Suite 406

City State

Zip Code

Guaynabo

PR

00968

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4976

Amount Incurred This Period

33502.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

33502.00

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

Pedro Clemente Quinones

Nature of Debt (Purpose):

Campaign Jingle

Mailing Address Urb. Country Club
1100 Carmen Busello St.

City

State

Zip Code

San Juan

PR

00924

Outstanding Balance Beginning This Period

2750.00

Transaction ID : SD10.4256

Amount Incurred This Period

0.00

Payment This Period

2850.01

Outstanding Balance at Close of This Period

-100.01

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

35051.99

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

0.00

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 61 OF 63

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

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

Carl Gibbs Acosta

Nature of Debt (Purpose):

campaign statistics consultant

Mailing Address Cape Village B-4 Buzon 110

City State

Carolina

Zip Code

PR

00979

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4965

Amount Incurred This Period

4000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

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

Javier Lamboy

Nature of Debt (Purpose):

Treasurer Assisstant

Mailing Address Carmen St. # 5

Isabelle Bldg Apt # 2

City State

San Juan

Zip Code

PR

00917

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4969

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

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

Partido Popular Democratico Inc.

Nature of Debt (Purpose):

Office space rent

Mailing Address 403 Constitucion Ave.

City

San Juan

State

PR

Zip Code

00906

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4893

Amount Incurred This Period

2850.00

Payment This Period

1900.00

Outstanding Balance at Close of This Period

950.00

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

7450.00

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

0.00

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 62 OF 63

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

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

Ricoh PRNature of Debt (Purpose):
copy machineMailing Address National Plaza Bldg suite 1700
431 Ponce de Leon Ave.City State Zip Code
San Juan PR 00917

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4971

Amount Incurred This Period

3660.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3660.00

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

Christopher Sanchez OrtizNature of Debt (Purpose):
Personal Assistant

Mailing Address PO Box 194555

City State Zip Code
San Juan PR 00919

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4900

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

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

Strategies Group Corp.Nature of Debt (Purpose):
video promotion

Mailing Address PO Box 367304

City State Zip Code
San Juan PR 00936-7304

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4974

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

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

9160.00

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

0.00

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 63 OF 63

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 , INC.

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

Edgardo Miguel Vazquez Rivera

Nature of Debt (Purpose):

evaluation of campaign issues

Mailing Address Tabonuco St. B-5 suite 216
PMB-112City State Zip Code
Guaynabo PR 00968-3022

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4967

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

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

Vias Car Rental of PR

Nature of Debt (Purpose):

vehicle rental for campaign events

Mailing Address Isla Verde

City State Zip Code
Carolina PR 00979

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4973

Amount Incurred This Period

2435.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

2435.75

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

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

4935.75

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

59397.74

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) ▶

59397.74