

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

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

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

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

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

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
07 / 01 / 2012 through 09 / 30 / 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 Javier J Lamboy Hernandez

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

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
COX ALOMAR 2012 INC

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	313621.19	633197.94
(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)).....	313621.19	633197.94
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	277747.43	547259.40
(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)).....	277747.43	547259.40
8. Cash on Hand at Close of Reporting Period (from Line 27).....	81628.31	
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).....	100659.13	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

COX ALOMAR 2012 INC

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	194066.41	407904.85
(ii) Unitemized.....	119554.78	221793.09
(iii) TOTAL of contributions from individuals ▶	313621.19	629697.94
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	3500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	313621.19	633197.94
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	2100.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	313621.19	635297.94

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	277747.43	547259.40
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	132.15	6410.23
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	277879.58	553669.63

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	45886.70
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	313621.19
25. SUBTOTAL (add Line 23 and Line 24).....	359507.89
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	277879.58
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	81628.31

: 97 `A-G79 @C5 B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`G7 <98I @ `CF`#H9A-N5HCB

Form/Schedule: F3A
Transaction ID :

Cox Alomar 2012, Inc. noticed an error on the Cash-on-Hand reflected on the Year-End Report. Immediately, began a check-by-check, contribution-by-contribution review from the July Quaterly through Year-End periods. As a result, the Committee proceeded to amend the Reports in order to correct the reporting errors and fulfill the reporting requirements established on 11 CFR 104.3. The Committee changed its internal policy and the contributions recieved are required to be part of a complete report for compliance staff within 24 hours after the contribution is made. Reporting staff is requested to made the entries on FEC File system within the next 48 hours after receiving the report. The increase on receipts reflected on the ammended report is the result of this check-by-check, contribution-by-contribution internal audit.

Form/Schedule:
Transaction ID:

**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 6 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)
Anibal Acevedo Vila

Mailing Address Ave. Munoz Rivera 894
Suite 202

City San Juan State PR Zip Code 00927

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 22 / 2012

Transaction ID : SA11AI.8315

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Melba I. Acosta

Mailing Address Cond. Torre Cibeles
529 Cesar Gonzalez Apt. 1412

City San Juan State PR Zip Code 00918

FEC ID number of contributing federal political committee. **C**

Name of Employer Mc Connell & Valdes Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 13 / 2012

Transaction ID : SA11AI.9089

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Jose Acosta Grubb

Mailing Address 25 Emajagua St.

City San Juan State PR Zip Code 00913

FEC ID number of contributing federal political committee. **C**

Name of Employer Fiddler, Gonzalez & Rodriguez Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 15 / 2012

Transaction ID : SA11AI.8732

Amount of Each Receipt this Period
200.00

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

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

950.00

**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)	PAGE 7 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Juan Agosto Alicea

Mailing Address 402 Plaza Atlantica

City State Zip Code
Carolina PR 00979

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
R&G Financial Group Chairman

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 27 / 2012

Transaction ID : SA11AI.8327

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Juan Agosto Alicea

Mailing Address 402 Plaza Atlantica

City State Zip Code
Carolina PR 00979

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
R&G Financial Group Chairman

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
950.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 13 / 2012

Transaction ID : SA11AI.9079

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Blanca Agrait

Mailing Address Urb. Baldrich
Tous Soto 202

City State Zip Code
San Juan PR 00918

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 02 / 2012

Transaction ID : SA11AI.7665

Amount of Each Receipt this Period
250.00

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: (check only one)	PAGE 8 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Fernando Agrait Betancourt

Mailing Address 701 Ave. Ponce de Leon
Edif. Centro de Seguro 414

City San Juan State PR Zip Code 00907

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Attorney

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
 07 / 27 / 2012

Transaction ID : SA11AI.8326

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Fernando Agrait Betancourt

Mailing Address 701 Ave. Ponce de Leon
Edif. Centro de Seguro 414

City San Juan State PR Zip Code 00907

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2012

Transaction ID : SA11AI.7819

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Blanca Agrait Llado

Mailing Address Urb. Baldrich
202 Tous Soto St.

City San Juan State PR Zip Code 00918

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
263.22

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 02 / 2012

Transaction ID : SA11AI.7580

Amount of Each Receipt this Period
263.22

In-kind - Fundraising Expense-Meals and Beverages

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

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

1763.22

**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 9 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Blanca Agrait Llado

Mailing Address Urb. Baldrich
202 Tous Soto St.

City San Juan State PR Zip Code 00918

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1663.22

Date of Receipt
MM / DD / YYYY
08 / 02 / 2012

Transaction ID : SA11AI.9667

Amount of Each Receipt this Period
1400.00

In-kind - Fundraising Expenses-Meals

B. Full Name (Last, First, Middle Initial)
Juan Aguayo Leal

Mailing Address Neptuno #54
Ext. El Verde

City Caguas State PR Zip Code 00725

FEC ID number of contributing federal political committee. **C**

Name of Employer Traicon Associates, LLC Occupation Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
07 / 18 / 2012

Transaction ID : SA11AI.8365

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ada M. Albors Hernandez

Mailing Address P.O. Box 1842

City Mayaguez State PR Zip Code 00681-1842

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation Housewife

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
MM / DD / YYYY
08 / 24 / 2012

Transaction ID : SA11AI.8066

Amount of Each Receipt this Period
500.00

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

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

2150.00

**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)	PAGE 10 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Ada M. Albors Hernandez		Date of Receipt M M / D D / Y Y Y Y Y 08 / 26 / 2012	
Mailing Address P.O. Box 1842		Transaction ID : SA11AI.8753	
City Mayaguez	State PR	Zip Code 00681-1842	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Unemployed	Occupation Housewife		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00		

Full Name (Last, First, Middle Initial) B. Eugenio M. Alonso		Date of Receipt M M / D D / Y Y Y Y Y 08 / 02 / 2012	
Mailing Address Urb. Baldrich 202 Tous Soto St.		Transaction ID : SA11AI.7576	
City San Juan	State PR	Zip Code 00918	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00 In-kind - Fundraising Meals	
Name of Employer Self-Employed	Occupation Consultant		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2200.00		

Full Name (Last, First, Middle Initial) C. Eugenio M. Alonso		Date of Receipt M M / D D / Y Y Y Y Y 08 / 12 / 2012	
Mailing Address Urb. Baldrich 202 Tous Soto St.		Transaction ID : SA11AI.9665	
City San Juan	State PR	Zip Code 00918	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 321.48 In-kind - Fundraising Expenses-Beverages	
Name of Employer Self-Employed	Occupation Consultant		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2521.48		

SUBTOTAL of Receipts This Page (optional).....	1421.48
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 11 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) Eugenio M. Alonso		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 16 / 2012
Mailing Address Urb. Baldrich 202 Tous Soto St.		Transaction ID : SA11AI.8963
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Self-Employed	Occupation Consultant	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2721.48	

Full Name (Last, First, Middle Initial) Pablo I. Altieri		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 19 / 2012
Mailing Address Box 8387		Transaction ID : SA11AI.8309
City Humacao	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Medical Doctor	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Andres Alvarez Cruz		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 24 / 2012
Mailing Address PO Box 1014		Transaction ID : SA11AI.9722
City Comerio	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Retailer	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1700.00
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: (check only one)	PAGE 12 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Carmen R. Amador De Jesus

Mailing Address Urb. Bucare
2059 Calle Topacio

City Guaynabo State PR Zip Code 00969

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation 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 Y
 08 / 07 / 2012

Transaction ID : SA11AI.8727

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Cyril Anis

Mailing Address Cond. Playa Grande
1 Taft St. Apt. 12-F

City San Juan State PR Zip Code 00907

FEC ID number of contributing federal political committee. **C**

Name of Employer Alianza Francesa Occupation Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 11 / 2012

Transaction ID : SA11AI.8555

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Salvador J Antonetti Stuts

Mailing Address Cond. Park Boulevard Apt. 316
Laurel St. 2305

City San Juan State PR Zip Code 00913

FEC ID number of contributing federal political committee. **C**

Name of Employer Oneill & Borges Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 16 / 2012

Transaction ID : SA11AI.8834

Amount of Each Receipt this Period
100.00

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

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

2800.00

**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)	PAGE 13 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Juan Aponte

Mailing Address Box 8869

City San Juan State PR Zip Code 00910

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Actuary

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.9080

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
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 unemployed Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 14 / 2012

Transaction ID : SA11AI.7832

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Hector Aponte Rivera

Mailing Address PO Box 490

City Yabucoa State PR Zip Code 00767

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 11 / 2012

Transaction ID : SA11AI.7962

Amount of Each Receipt this Period
400.00

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: PAGE 14 OF 311
(check only one)
 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)
Jorge Aquino Nunez

Mailing Address Box 1426

City Lares State PR Zip Code 00669

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 11 / 2012

Transaction ID : SA11AI.7966

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Rafael Aragunde

Mailing Address Apt. 5062

City Cayey State PR Zip Code 00737

FEC ID number of contributing federal political committee. **C**

Name of Employer University of Puerto Rico Occupation Professor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 26 / 2012

Transaction ID : SA11AI.8317

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Jose Arias Rodriguez

Mailing Address Urb. garden Hills
W2 Loma Alta

City Guaynabo State PR Zip Code 00966

FEC ID number of contributing federal political committee. **C**

Name of Employer UBS Financial Occupation Broker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.9072

Amount of Each Receipt this Period
 250.00

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: (check only one)	PAGE 15 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Carmen Arriaga Correa

Mailing Address Urb. Marina Bahia
Ave. La Marina MB-1

City Catano State PR Zip Code 00962

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **240.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 15 / 2012

Transaction ID : SA11AI.8514

Amount of Each Receipt this Period
140.00

B. Full Name (Last, First, Middle Initial)
Carmen Arriaga Correa

Mailing Address Urb. Marina Bahia
Ave. La Marina MB-1

City Catano State PR Zip Code 00962

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **315.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 22 / 2012

Transaction ID : SA11AI.7901

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
Carmen Arriaga Correa

Mailing Address Urb. Marina Bahia
Ave. La Marina MB-1

City Catano State PR Zip Code 00962

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **415.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 22 / 2012

Transaction ID : SA11AI.8167

Amount of Each Receipt this Period
100.00

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

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

315.00

**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)	PAGE 16 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Francisco Arrivi		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 13 / 2012	
Mailing Address 2005 Espana St. Ocean Park		Transaction ID : SA11AI.9046	
City San Juan State PR Zip Code 00911	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed Occupation Attorney		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. Francisco Arrivi		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 16 / 2012	
Mailing Address 2005 Espana St. Ocean Park		Transaction ID : SA11AI.8955	
City San Juan State PR Zip Code 00911	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed Occupation Attorney		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 550.00		

Full Name (Last, First, Middle Initial) C. Eiton Arroyo Muniz		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 26 / 2012	
Mailing Address P.O. Box 505		Transaction ID : SA11AI.8749	
City Anasco State PR Zip Code 00610	Amount of Each Receipt this Period 1017.90 In-kind - Fundraising Expenses-Meals and Beverages		
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed Occupation Lawyer		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1217.90		

SUBTOTAL of Receipts This Page (optional).....	1567.90
TOTAL This Period (last page this line number only).....	[Empty Box]

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

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

FOR LINE NUMBER: PAGE 17 OF 311
(check only one)
 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)
Eiton Arroyo Muniz

Mailing Address P.O. Box 505

City Anasco State PR Zip Code 00610

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1417.90

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 26 / 2012

Transaction ID : SA11AI.8806

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Marjorie Avila Torres

Mailing Address Cond. Imaculada Plaza I Apt. 904
1717 Ponc de Leon Ave

City San Juan State PR Zip Code 00909-1937

FEC ID number of contributing federal political committee. **C**

Name of Employer self employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 12 / 2012

Transaction ID : SA11AI.7779

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Milton Ayala Morales

Mailing Address PO Box 1080

City Barranquitas State PR Zip Code 00794

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Certified Public Accountant

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
 09 / 28 / 2012

Transaction ID : SA11AI.9726

Amount of Each Receipt this Period
1000.00

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

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

1300.00

**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)	PAGE 18 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Jorge L Baco		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 13 / 2012	
Mailing Address PO Box 9023918		Transaction ID : SA11AI.9071	
City San Juan	State PR	Zip Code 00902-3918	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Global Insurance	Occupation President		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00		

Full Name (Last, First, Middle Initial) B. Roberto Baerga Aponte		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 02 / 2012	
Mailing Address P.O. Box 8908		Transaction ID : SA11AI.7667	
City San Juan	State PR	Zip Code 00910-0908	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Consumer Credit Counseling	Occupation President		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. Johnny Barreto		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 03 / 2012	
Mailing Address PO Box 1344 Saint Just Station		Transaction ID : SA11AI.8552	
City Trujillo Alto	State PR	Zip Code 00978	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Econo Supermarkets	Occupation Owner		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

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

FOR LINE NUMBER: PAGE 19 OF 311
(check only one)
 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)
Johnny Barreto

Mailing Address **PO Box 1344**
Saint Just Station

City **Trujillo Alto** State **PR** Zip Code **00978**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Econo Supermarkets** Occupation **Owner**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 11 / 2012

Transaction ID : SA11AI.8122

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Juan Bayron Justiniano

Mailing Address **Urb. Bucare 2061**
Topacio St.

City **Guaynabo** State **PR** Zip Code **00969**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Medicina Interna** Occupation **Medical Doctor**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 21 / 2012

Transaction ID : SA11AI.8286

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Laura Belendez Ferrero

Mailing Address **1 C4 St.**
Mans. Garden Hills

City **Guaynabo** State **PR** Zip Code **00969**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Ferrioli LLC** Occupation **Lawyer**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 18 / 2012

Transaction ID : SA11AI.8373

Amount of Each Receipt this Period
250.00

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

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

1750.00

**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)	PAGE 20 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Margarita Benitez

Mailing Address 1514 17th St. NW. Apt. 513

City Washington State PR Zip Code 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer: Excelencia in Education Occupation: Senior Associate

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: **225.00**

Date of Receipt: **07 / 12 / 2012**

Transaction ID : SA11AI.7649

Amount of Each Receipt this Period: **125.00**

B. Full Name (Last, First, Middle Initial)
Jose L. Benitez Aponte

Mailing Address 23 Harbour Lights
Palmas del Mar

City Humacao State PR Zip Code 00791

FEC ID number of contributing federal political committee. **C**

Name of Employer: Self-Employed Occupation: Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: **400.00**

Date of Receipt: **08 / 10 / 2012**

Transaction ID : SA11AI.8092

Amount of Each Receipt this Period: **400.00**

C. Full Name (Last, First, Middle Initial)
Marimar Benitez Rivera

Mailing Address Urb. Roosevelt
407 Jose R. Acosta St.

City San Juan State PR Zip Code 00918

FEC ID number of contributing federal political committee. **C**

Name of Employer: Retired Occupation: Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: **700.00**

Date of Receipt: **09 / 16 / 2012**

Transaction ID : SA11AI.8897

Amount of Each Receipt this Period: **100.00**

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

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

625.00

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

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

FOR LINE NUMBER: PAGE 21 OF 311
(check only one)
 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)
Julio Benitez Rodriguez

Mailing Address HC-01 Box 4604

City State Zip Code
Naguabo PR 00718

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JBD Inc. Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 11 / 2012

Transaction ID : SA11AI.7956

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Carmen Bermudez Perez

Mailing Address PO Box 130

City State Zip Code
Bayamon PR 00960

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2012

Transaction ID : SA11AI.8985

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Efrain Bermudez Rivera

Mailing Address Calle 5 de octubre # 9

City State Zip Code
Santa Isabel PR 00757

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2012

Transaction ID : SA11AI.8155

Amount of Each Receipt this Period
200.00

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: (check only one)	PAGE 22 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Jose Berrios Torres		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 25 / 2012
Mailing Address HC 4 Box 2900		Transaction ID : SA11AI.9708
City Barranquitas	State PR	Zip Code 00794
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Self-Employed	Occupation Retailer	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Millie Biascoechea		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 23 / 2012
Mailing Address San Francisco 1713 Jazmin		Transaction ID : SA11AI.8456
City San Juan	State PR	Zip Code 00927
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 320.00	
Name of Employer Self-Employed	Occupation Designer Consultant	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 420.00	

Full Name (Last, First, Middle Initial) C. Maximo Blondet Matienzo		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2012
Mailing Address 206 Pajuil St. Ext. Milaville		Transaction ID : SA11AI.9516
City San Juan	State PR	Zip Code 00926
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Self-Employed	Occupation Economist	Contribution via Internet (ACH)
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	1070.00
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: (check only one)	PAGE 23 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Nelson Burgos		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 11 / 2012
Mailing Address Box 938		Transaction ID : SA11AI.7972
City Naguabo	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Self-Employed	Occupation Retailer	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) B. Neftali Burgos Perez		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 27 / 2012
Mailing Address HC 2 Box 7300		Transaction ID : SA11AI.9704
City Orocovis	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Ferreteria del Centro	Occupation Autorized Public Accountant	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. BURSON-MARSTELLER/YOUNG & RUBICAM/PRIME POLICY GROUP POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 12 / 2012
Mailing Address 1110 VERMONT AVENUE, NW SUITE 1000		Transaction ID : SA11AI.9333
City WASHINGTON	State DC	
FEC ID number of contributing federal political committee. C C00201863		Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

SUBTOTAL of Receipts This Page (optional).....	2600.00
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: (check only one)		PAGE 24 OF 311	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Luis Cabrera de la Mata

Mailing Address **PMB 117**
Garden Hills Plaza 1353

City **Guaynabo** State **PR** Zip Code **00966**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Medical Doctor**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
07 / 18 / 2012

Transaction ID : SA11AI.8377

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Jorge Calderon Drowet

Mailing Address **Urb Monte Hiedra**
Calle Guaraguao 140

City **San Juan** State **PR** Zip Code **00926**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Unemployed** Occupation **Retired**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
08 / 11 / 2012

Transaction ID : SA11AI.9765

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Manuel Calero

Mailing Address **Box 801**

City **Rio Blanco** State **PR** Zip Code **00744**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Farmer**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
08 / 11 / 2012

Transaction ID : SA11AI.7968

Amount of Each Receipt this Period
1000.00

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

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

1450.00

**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)	PAGE 25 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Ivonne Camacho Pastor		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 16 / 2012	
Mailing Address Ramos Antonini 162 Este		Transaction ID : SA11AI.8061	
City Mayaguez	State PR	Zip Code 00680	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self-Employed	Occupation Medical Doctor		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. Jorge R. Carbonell		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 05 / 2012	
Mailing Address 605 Mississippi St.		Transaction ID : SA11AI.8299	
City San Francisco	State CA	Zip Code 94107-2936	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self Employment	Occupation Architect		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. Francisco Carvajal Narvaez		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 13 / 2012	
Mailing Address Apartado 1298		Transaction ID : SA11AI.9047	
City Guaynabo	State PR	Zip Code 00970	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Fundacion Francisco Carvajal	Occupation President		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	2000.00

**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)	PAGE 26 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)
Aurora Casablanca

Mailing Address Urb. Sabanera
251 Flamboyán St.

City Dorado State PR Zip Code 00646

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.9021

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Aurora M. Casablanca

Mailing Address Urb. Quintas del Rio
El Plaza 3

City Bayamon State PR Zip Code 00961

FEC ID number of contributing federal political committee. **C**

Name of Employer Servicios de TV Paga Occupation Executive

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 02 / 2012

Transaction ID : SA11AI.7674

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Olga M. Casanova de Cestero

Mailing Address Casillas de Palmas
155 Candler Dr Apt. D-8

City Humacao State PR Zip Code 00791

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 04 / 2012

Transaction ID : SA11AI.8104

Amount of Each Receipt this Period
400.00

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: (check only one)	PAGE 27 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Emilio Casellas

Mailing Address 656 Miramar Ave.
Apto. 7-A

City San Juan State PR Zip Code 00907

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Puerto Rico Senior Golf League Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 13 / 2012

Transaction ID : SA11AI.9039

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
Miguel A. Casellas Lopez

Mailing Address PO Box 11884

City San Juan State PR Zip Code 00922-1884

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AON Vice-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 Y Y
08 / 15 / 2012

Transaction ID : SA11AI.8689

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Francisco Cebollero

Mailing Address P.O. Box 3146

City Mayaguez State PR Zip Code 00681-3146

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
self-employed Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1986.78

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 26 / 2012

Transaction ID : SA11AI.9669

Amount of Each Receipt this Period
986.78
In-kind - Fundraising Expenses-Meals

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

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

1486.78

**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 311
(check only one)
 11a 11b 11c 11d
 12 13a 13b 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)
Denise Centeno

Mailing Address Harbour Point C-102

City State Zip Code
Humacao PR 00791

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Unemployed Homemaker

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
 08 / 11 / 2012

Transaction ID : SA11AI.10907

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Jose J Cerra Castaner

Mailing Address Cond. Los Olmos 36 C/ Nevarez
Apt. 141

City State Zip Code
San Juan PR 00927

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 12 / 2012

Transaction ID : SA11AI.7661

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Jose R. Cestero- Casanova

Mailing Address PO Box 195052

City State Zip Code
San Juan PR 00919-5052

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Unemployed Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2012

Transaction ID : SA11AI.9825

Amount of Each Receipt this Period
250.00

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

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

1375.00

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.10907

Erroneously this activity was not disclosed correctly on the original report. Cox Alomar 2012, Inc. noticed an error on the Cash-on-Hand reflected on the Year-End Report. Immediately, began a check-by-check, contribution-by-contribution review from the July Quaterly through Year-End periods. As a result, the Committee proceeded to amend the Reports in order to correct the reporting errors and fulfill the reporting requirements established on 11 CFR 104.3. The Committee changed its internal policy and the contributions recieved are required to be part of a complete report for compliance staff within 24 hours after the contribution is made. Reporting staff is requested to made the entries on FEC File system within the next 48 hours after receiving the report

Form/Schedule:

Transaction ID:

**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 30 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Luis Chaves Torres

Mailing Address P.O. Box 192928

City San Juan State PR Zip Code 00919

FEC ID number of contributing federal political committee. **C**

Name of Employer Sunny Planet Eye Wear Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2012

Transaction ID : SA11AI.8008

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Arturo Cherena

Mailing Address 626 Berwin Urb. Summit Hills

City San Juan State PR Zip Code 00920

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Wine Broker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 05 / 2012

Transaction ID : SA11AI.8540

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
Iris Christianson

Mailing Address Urb. Bucare #11 Diamante St.

City Guaynabo State PR Zip Code 00969

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
209.55

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 12 / 2012

Transaction ID : SA11AI.9661

Amount of Each Receipt this Period
209.55
In-kind - Fundraising Expenses-Meals

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

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

3709.55

**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 31 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Luis Cintron Pineiro

Mailing Address **PO Box 126**

City **Angeles** State **PR** Zip Code **00611**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **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 Y Y
08 / 10 / 2012

Transaction ID : SA11AI.7589

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Carlos Colon

Mailing Address **PO Box 192037**

City **San Juan** State **PR** Zip Code **00919**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Lawyer**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 13 / 2012

Transaction ID : SA11AI.9028

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Carlos Colon

Mailing Address **PO Box 192037**

City **San Juan** State **PR** Zip Code **00919**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Lawyer**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 16 / 2012

Transaction ID : SA11AI.8969

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 RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Miguel Colon

Mailing Address 112 Juall Ramos St.

City Bayamon	State PR	Zip Code 00961
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed	Occupation Retired
--------------------------------	-----------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.9090

Amount of Each Receipt this Period
800.00

B. Full Name (Last, First, Middle Initial)
Miguel Colon Capeles

Mailing Address PO Box 35

City Barranquitas	State PR	Zip Code 00794
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation Retailer
-----------------------------------	------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 14 / 2012

Transaction ID : SA11AI.9720

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Rafael Colon Diaz

Mailing Address PO Box 647

City Carolina	State PR	Zip Code 00986
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation Medical Doctor
-----------------------------------	------------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2012

Transaction ID : SA11AI.8279

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: PAGE 33 OF 311
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Luis Colon Gonzalez
 Mailing Address 254 San Jose
 City San Juan State PR Zip Code 00921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Attorney
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2012
Transaction ID : SA11AI.10905
 Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
Carlos Colon McFarland
 Mailing Address 267 San Jorge St.
 Apt. 6C
 City San Juan State PR Zip Code 00912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Developer
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012
Transaction ID : SA11AI.9029
 Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Raquel Colon Otero
 Mailing Address Urb. Quintas Las Mueas
 156 Calle Fco. Colon, Julia D-4
 City Cayey State PR Zip Code 00736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2012
Transaction ID : SA11AI.8063
 Amount of Each Receipt this Period
 500.00

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

3250.00

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.10905

Erroneously this activity was not disclosed correctly on the original report. Cox Alomar 2012, Inc. noticed an error on the Cash-on-Hand reflected on the Year-End Report. Immediately, began a check-by-check, contribution-by-contribution review from the July Quaterly through Year-End periods. As a result, the Committee proceeded to amend the Reports in order to correct the reporting errors and fulfill the reporting requirements established on 11 CFR 104.3. The Committee changed its internal policy and the contributions recieved are required to be part of a complete report for compliance staff within 24 hours after the contribution is made. Reporting staff is requested to made the entries on FEC File system within the next 48 hours after receiving the report

Form/Schedule: SA11AI

Transaction ID: SA11AI.8063

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Hector Colon Resto

Mailing Address PO Box 8253

City Caguas State PR Zip Code 00726

FEC ID number of contributing federal political committee. **C**

Name of Employer Colon Construction Inc. Occupation President/Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2012

Transaction ID : SA11AI.9831

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Manuel Colon Rivera

Mailing Address PO Box 195183

City San Juan State PR Zip Code 00918

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Retailer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.9086

Amount of Each Receipt this Period
 400.00

C. Full Name (Last, First, Middle Initial)
Manuel Colon Rivera

Mailing Address PO Box 195183

City San Juan State PR Zip Code 00918

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Retailer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 20 / 2012

Transaction ID : SA11AI.8424

Amount of Each Receipt this Period
 300.00

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

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

1200.00

**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)	PAGE 36 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Arsenio Comas Urrutia

Mailing Address Urb. Torrimar Bamboo K3

City State Zip Code
Guaynabo PR 00966

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Gynecologist-Obstetrician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2012

Transaction ID : SA11AI.8995

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Ralph Conaway

Mailing Address PO Box 362309

City State Zip Code
Guaynabo PR 00936

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 04 / 2012

Transaction ID : SA11AI.7835

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Eduardo Cortes Gonzalez

Mailing Address Urb. La Arboleda
D-6 Pino del Rio

City State Zip Code
Guaynabo PR 00966

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hilsa Group Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.9035

Amount of Each Receipt this Period
250.00

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

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

950.00

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

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

FOR LINE NUMBER: PAGE 37 OF 311
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 11e 15

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Maria L. Cox Alomar

Mailing Address **PMB 356**
138 Winston Churchill Ave.

City **San Juan** State **PR** Zip Code **00926-6013**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Unemployed** Occupation **Homemaker**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 12 / 2012

Transaction ID : SA11AI.7800

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Maria L. Cox Alomar

Mailing Address **PMB 356**
138 Winston Churchill Ave.

City **San Juan** State **PR** Zip Code **00926-6013**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Unemployed** Occupation **Homemaker**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
825.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 13 / 2012

Transaction ID : SA11AI.9088

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Luis Cruz Batista

Mailing Address **Cond. Avila Apt. 1-D**
Costa Rica St.

City **San Juan** State **PR** Zip Code **00917**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Certified Public Accountant**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 13 / 2012

Transaction ID : SA11AI.9084

Amount of Each Receipt this Period
400.00

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

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

950.00

**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)	PAGE 38 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Ivette Cruz Pagan		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 15 / 2012
Mailing Address PO Box 6798		Transaction ID : SA11AI.8397
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Academia de Psiquiatria de PR	Occupation Physician	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) B. Wilfredo Cubero Soto		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 19 / 2012
Mailing Address P.O. Box 3919		Transaction ID : SA11AI.8811
City Mayaguez	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer General Decor MFG Corp.	Occupation Owner	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) C. Jose Ramon Cumba		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 11 / 2012
Mailing Address PO Box 130		Transaction ID : SA11AI.7545
City Bayamon	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer self employed	Occupation Physician	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00	

SUBTOTAL of Receipts This Page (optional).....	1300.00
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: (check only one)	PAGE 39 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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

Full Name (Last, First, Middle Initial) A. Jose Ramon Cumba		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 11 / 2012
Mailing Address PO Box 130		Transaction ID : SA11Al.8005
City Bayamon	State PR	Zip Code 00960
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer self employed	Occupation Physician	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4000.00	

Full Name (Last, First, Middle Initial) B. Jose Dalmau Santiago		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 08 / 2012
Mailing Address PO Box 1103		Transaction ID : SA11Al.10893
City Caguas	State PR	Zip Code 00726
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 700.00	
Name of Employer Self-Employed	Occupation General Consultant	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00	

Full Name (Last, First, Middle Initial) C. Romulo Danzot Arroyo		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 11 / 2012
Mailing Address PO Box 233		Transaction ID : SA11Al.7946
City Yabucoa	State PR	Zip Code 00767
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 600.00	
Name of Employer Unemployed	Occupation Retired	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

SUBTOTAL of Receipts This Page (optional).....	2300.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.10893

Erroneously this activity was not disclosed correctly on the original report. Cox Alomar 2012, Inc. noticed an error on the Cash-on-Hand reflected on the Year-End Report. Immediately, began a check-by-check, contribution-by-contribution review from the July Quaterly through Year-End periods. As a result, the Committee proceeded to amend the Reports in order to correct the reporting errors and fulfill the reporting requirements established on 11 CFR 104.3. The Committee changed its internal policy and the contributions recieved are required to be part of a complete report for compliance staff within 24 hours after the contribution is made. Reporting staff is requested to made the entries on FEC File system within the next 48 hours after receiving the report

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 41 OF 311
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Angel Davila

Mailing Address **PO Box 1496**

City **Juncos** State **PR** Zip Code **00777**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Gennesaret Farming Systems** Occupation **Engineer**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 11 / 2012

Transaction ID : SA11AI.8532

Amount of Each Receipt this Period
2100.00

B. Full Name (Last, First, Middle Initial)
Jose Guillermo Davila

Mailing Address **Urb. Quintas del Rio
El Plaza # 3**

City **Bayamon** State **PR** Zip Code **00961**

FEC ID number of contributing federal political committee. **C**

Name of Employer **S and P Tax** Occupation **Accountant**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 16 / 2012

Transaction ID : SA11AI.8835

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ruth Davila Matos

Mailing Address **A31 1st St.
Ext. Vila Rica**

City **Bayamon** State **PR** Zip Code **00959**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Laboratorio Caribe** Occupation **Owner**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 13 / 2012

Transaction ID : SA11AI.9102

Amount of Each Receipt this Period
400.00

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

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

2600.00

**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)	PAGE 42 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Gladys De Hestres		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 16 / 2012
Mailing Address PO Box 9021024		Transaction ID : SA11AI.8937
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer unemployed	Occupation Homemaker	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1275.00	

Full Name (Last, First, Middle Initial) B. Nestor De Jesus Pou		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 13 / 2012
Mailing Address Urb. La Villa de Torrimar 163 Reina Ana St.		Transaction ID : SA11AI.9092
City Guaynabo	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Ana G Mendez Universitary Syst	Occupation Board Member	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. Angel De Leon		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 01 / 2012
Mailing Address Cantera 13 Aponte St.		Transaction ID : SA11AI.9815
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

: 97 `A -G7 9 @ @ B9 CI G`H9 LH`F9 @ H98 `HC `5 `F9 DCFH`ZG7 <98 I @ `CF `H9 A -N5 H-CB

Form/Schedule: SA11AI

Transaction ID : SA11AI.9815

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

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 44 OF 311
(check only one)
 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)
Israel Delgado

Mailing Address **A Lopez Font Martelo St.**

City **Humacao** State **PR** Zip Code **00991**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Attorney**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 11 / 2012

Transaction ID : SA11A1.9738

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
Nivia Delgado Benabe

Mailing Address **PO Box 3762**

City **Carolina** State **PR** Zip Code **00984**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Policlinica Luis Rodriguez** Occupation **Teacher-Administrator**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 28 / 2012

Transaction ID : SA11A1.8277

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Manuel Del Nido

Mailing Address **Calle Argentina
Garden Hills**

City **Guaynabo** State **PR** Zip Code **00966**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Del Nido & Associates** Occupation **President**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 22 / 2012

Transaction ID : SA11A1.7815

Amount of Each Receipt this Period
500.00

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

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

1400.00

**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)	PAGE 45 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Wichy Diaz Natal		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 13 / 2012	
Mailing Address Box 135		Transaction ID : SA11AI.9109	
City Manati	State PR	Zip Code 00674	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self-Employed	Occupation Lawyer		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. Roque Diaz Tizol		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 11 / 2012	
Mailing Address HC # Box 1298		Transaction ID : SA11AI.7938	
City Yabucoa	State PR	Zip Code 00767	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Dr. Roque Diaz Tizol College	Occupation Owner		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) C. Juan R. Diaz Troche		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 24 / 2012	
Mailing Address Road 351 # 3230		Transaction ID : SA11AI.8053	
City Mayaguez	State PR	Zip Code 00682	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer self employed	Occupation Surgeon		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

SUBTOTAL of Receipts This Page (optional).....	1800.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 46 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Normando G. Duran Guzman

Mailing Address 351 Ave. Hostos Suite 209

City Mayaguez State PR Zip Code 00680

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 17 / 2012

Transaction ID : SA11AI.8067

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Rafael Escalera

Mailing Address PO Box 364148

City San Juan State PR Zip Code 00936

FEC ID number of contributing federal political committee. **C**

Name of Employer Reichard & Escalera Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.9096

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Jose Fas Quinones

Mailing Address Chalets de Cupey
200 Ave. Los Chalets 93 Apt. L124

City San Juan State PR Zip Code 00926

FEC ID number of contributing federal political committee. **C**

Name of Employer Goldman, Antonetti & Cordova Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.9069

Amount of Each Receipt this Period
1000.00

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

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

1750.00

**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)	PAGE 47 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Jorge L. Fernandez		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 26 / 2012
Mailing Address PO Box 360892		Transaction ID : SA11AI.8319
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer OMEGA	Occupation Executive	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) B. Jose E. Fernandez		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 09 / 2012
Mailing Address 1717 Calle Lilas		Transaction ID : SA11AI.8313
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) C. Mary Jane Fernandez		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 11 / 2012
Mailing Address 1717 Calle Lilas		Transaction ID : SA11AI.8311
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Unemployed	Occupation Homemaker	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

SUBTOTAL of Receipts This Page (optional).....	5300.00
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: (check only one)	PAGE 48 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Jose Fernandez Paoli		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 22 / 2012
Mailing Address PO Box 11750		Transaction ID : SA11AI.7830
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Delgado & Fernandez LLP	Occupation Attorney	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. Nereida Figueroa Maldonado		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 31 / 2012
Mailing Address Plaza del Parque Apt. 243		Transaction ID : SA11AI.8525
City Trujillo Alto	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer San Juan Municipality	Occupation Assistant	In-kind - Fundraising Expenses-Music
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) C. Aida Figueroa Ortiz		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 18 / 2012
Mailing Address PO Box 1267 Apdo. 43		Transaction ID : SA11AI.8383
City Naguabo	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Unemployed	Occupation Retired	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	1650.00
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: (check only one)	PAGE 49 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Joel Flores Cruz

Mailing Address Urb. Bosque Llanos
419 Caoba St.

City San Lorenzo State PR Zip Code 00754

FEC ID number of contributing federal political committee. **C**

Name of Employer AEE of Puerto Rico Occupation Supervisor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2012

Transaction ID : SA11AI.8017

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Irene Font

Mailing Address Urb. La Arboleda
B9 Hasting

City Guaynabo State PR Zip Code 00966

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation 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 Y Y
 08 / 22 / 2012

Transaction ID : SA11AI.7817

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
James Fox Acevedo

Mailing Address PO Box 3003

City Mayaguez State PR Zip Code 00681

FEC ID number of contributing federal political committee. **C**

Name of Employer Sucesores de Esmoris & Co. Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2012

Transaction ID : SA11AI.8049

Amount of Each Receipt this Period
500.00

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

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

1500.00

**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)	PAGE 50 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Manuel Franco		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 18 / 2012
Mailing Address Apartado 405		Transaction ID : SA11AI.8138
City Santa Isabel	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 255.59
Name of Employer Self-Employed	Occupation Retailer	In-kind - Fundraising Expenses-Meals
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 255.59	

Full Name (Last, First, Middle Initial) B. Gloriamalia Freire de Sanchez		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 22 / 2012
Mailing Address Urb. Santa Maria 58 Orquidea St.		Transaction ID : SA11AI.8517
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Unemployed	Occupation Homemaker	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Javier Fuentes		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 14 / 2012
Mailing Address PO Box 1121		Transaction ID : SA11AI.9065
City Manati	State PR	
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

SUBTOTAL of Receipts This Page (optional).....	1255.59
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: (check only one)	PAGE 51 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Hector Galarza

Mailing Address Urb. Purple Tree
518 Andres Bello St.

City San Juan State PR Zip Code 00926

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation 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 Y Y
 08 / 24 / 2012

Transaction ID : SA11AI.9313

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Pedro Galarza

Mailing Address 1570 Cabalieri St.
Urb. Caribe

City San Juan State PR Zip Code 00927

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation Retired

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
 07 / 03 / 2012

Transaction ID : SA11AI.8536

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Josefina Garcia Gonzalez

Mailing Address 96 Mayaguez St.

City San Juan State PR Zip Code 00917

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 10 / 2012

Transaction ID : SA11AI.9829

Amount of Each Receipt this Period
250.00

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

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

1750.00

**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)	PAGE 52 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Rafael Garcia Rodon

Mailing Address Edificio Banco Popular Suite 201
Calle Tetuan 206

City San Juan State PR Zip Code 00901

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2012

Transaction ID : SA11AI.9818

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Rafael Garcia Rodon

Mailing Address Edificio Banco Popular Suite 201
Calle Tetuan 206

City San Juan State PR Zip Code 00901

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1550.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2012

Transaction ID : SA11AI.8034

Amount of Each Receipt this Period
1200.00

C. Full Name (Last, First, Middle Initial)
Ivan Garriga

Mailing Address PO Box 364906

City San Juan State PR Zip Code 00936

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 27 / 2012

Transaction ID : SA11AI.8293

Amount of Each Receipt this Period
500.00

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

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

1950.00

**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)	PAGE 53 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Hector Gonzalez

Mailing Address **Box 364744**

City **San Juan** State **PR** Zip Code **00938**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Metro PR** Occupation **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 Y Y
09 / 13 / 2012

Transaction ID : SA11AI.9052

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ivonne Gonzalez

Mailing Address **Dorado East #183**

City **Dorado** State **PR** Zip Code **00646**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Homemaker**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 14 / 2012

Transaction ID : SA11AI.9058

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Jose Danilo Gonzalez

Mailing Address **Urb. Paraiso de Coamo
807 Serenidad Street**

City **Coamo** State **PR** Zip Code **00769**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AEE** Occupation **Engineer**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
310.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 19 / 2012

Transaction ID : SA11AI.8148

Amount of Each Receipt this Period
50.00

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

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

550.00

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

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

FOR LINE NUMBER: PAGE 54 OF 311
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Ramon Gonzalez Cordero

Mailing Address PO Box 363651

City San Juan State PR Zip Code 00936

FEC ID number of contributing federal political committee. **C**

Name of Employer Empire Gas Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2012

Transaction ID : SA11AI.8000

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Juan Gonzalez Fuentes

Mailing Address HC 74 Box 5284

City Naranjito State PR Zip Code 00719

FEC ID number of contributing federal political committee. **C**

Name of Employer Clinica La Montana Occupation Dentist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 14 / 2012

Transaction ID : SA11AI.9698

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Martin Gonzalez Luna

Mailing Address Urb. Panorama A2 Calle 2

City Bayamon State PR Zip Code 00957-4379

FEC ID number of contributing federal political committee. **C**

Name of Employer unemployed Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
364.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2012

Transaction ID : SA11AI.7999

Amount of Each Receipt this Period
100.00

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

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

2850.00

**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)	PAGE 55 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Ruth Gonzalez Reyes

Mailing Address Urb. El Comandante
962 Calle G de la Vega

City San Juan State PR Zip Code 00924-3527

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2012

Transaction ID : SA11Al.7845

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Maritza Gonzalez Seijo

Mailing Address Urb. Bucare 13
Diamante St.

City Guaynabo State PR Zip Code 00969

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Designer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.91

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 12 / 2012

Transaction ID : SA11Al.9659

Amount of Each Receipt this Period
350.91

In-kind - Fundraising Expenses-Music-Rentals

C. Full Name (Last, First, Middle Initial)
Jaime Gonzalez Suarez

Mailing Address 57 Washington St.
Apt. 2

City San Juan State PR Zip Code 00907

FEC ID number of contributing federal political committee. **C**

Name of Employer Ernst & Young Occupation Auditor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 15 / 2012

Transaction ID : SA11Al.8690

Amount of Each Receipt this Period
400.00

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

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

1250.91

**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 56 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Jeremias Gonzalez Velez

Mailing Address PO Box 546

City State Zip Code
jayuya PR 00664

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Gonzalez Bus Line Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2012

Transaction ID : SA11AI.9112

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Hector Goveo Ortiz

Mailing Address Box 1315

City State Zip Code
Bayamon PR 00960

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Certified Public Accountant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.9050

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Erin Graefe Dorton

Mailing Address 5 East Irving St.

City State Zip Code
Chevy Chase MD 20815

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Prime Policy Group Managing Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 24 / 2012

Transaction ID : SA11AI.8576

Amount of Each Receipt this Period
500.00

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

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

1400.00

**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)	PAGE 57 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Migdonia Grajales
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 363148
 City San Juan State PR Zip Code 00936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Unemployed Occupation Homemaker
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 02 / 2012
Transaction ID : SA11AI.9813
 Amount of Each Receipt this Period
 1000.00

B. Alex Gutierrez
 Full Name (Last, First, Middle Initial)
 Mailing Address Urb. Monticelo 114
 Calle Augusto Rodriguez
 City Caguas State PR Zip Code 00725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Engineered Solutions Occupation Engineer
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 24 / 2012
Transaction ID : SA11AI.9279
 Amount of Each Receipt this Period
 100.00

C. Porfirio Guzman Robles
 Full Name (Last, First, Middle Initial)
 Mailing Address PMB 43
 HC 72 Box 3766
 City Naranjito State PR Zip Code 00719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer A la Orden Discount Occupation President
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2012
Transaction ID : SA11AI.9716
 Amount of Each Receipt this Period
 500.00

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

1600.00

**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)	PAGE 58 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. James Healey		Date of Receipt MM / DD / YYYY 07 / 12 / 2012
Mailing Address 1110 Vermont Ave NW Ste 1000		Transaction ID : SA11AI.8563
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Doctor	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. Elsie LA Herger		Date of Receipt MM / DD / YYYY 08 / 17 / 2012
Mailing Address Cond. Candina One 1 Candina St. Apt. 2		Transaction ID : SA11AI.8457
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Hosteria del Mar	Occupation President	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) C. Edgardo Hernandez Lopez		Date of Receipt MM / DD / YYYY 09 / 26 / 2012
Mailing Address Urb. Parana S9 5th Street		Transaction ID : SA11AI.9511
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Medical Doctor	Contribution via Internet (ACH)
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	1500.00
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: (check only one)	PAGE 59 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Jose Hernandez Mayoral

Mailing Address Sol Alto St. #1

City San Juan State PR Zip Code 00901

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 09 / 2012

Transaction ID : SA11AI.8544

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Leslie Hufstetler Oquendo

Mailing Address Urb. Palmas Plantation
34 Birdie LN

City Humacao State PR Zip Code 00791

FEC ID number of contributing federal political committee. **C**

Name of Employer Sonnedix Solar Occupation VP of Operations

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.9082

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ivan Irizarry

Mailing Address Jazmin St. 1709
Urb. San Francisco

City San Juan State PR Zip Code 00936

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2012

Transaction ID : SA11AI.8648

Amount of Each Receipt this Period
250.00

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

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

3000.00

**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)	PAGE 60 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Jorge Irizarry Herrans		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 18 / 2012
Mailing Address 1308 Luchetti St. Apt. 401		Transaction ID : SA11AI.8367
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Sandoval Advisors	Occupation Consultant	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Jorge Irizarry Herrans		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 13 / 2012
Mailing Address 1308 Luchetti St. Apt. 401		Transaction ID : SA11AI.9070
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Sandoval Advisors	Occupation Consultant	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Jose A Janer		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 01 / 2012
Mailing Address Urb. Rio Piedras Heights 137 Yaguez St.		Transaction ID : SA11AI.9821
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

: 97 `A -G7 9 @ @ B9 CI G`H9 LH`F9 @ H98 `HC `5 `F9 DCFH`G7 <98 I @ `CF `H9 A -N5 H-CB

Form/Schedule: SA11AI

Transaction ID : SA11AI.9821

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

Form/Schedule:

Transaction ID:

**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 62 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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

Full Name (Last, First, Middle Initial) A. Boris Jaskille		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 18 / 2012	
Mailing Address 225 Tulip St. Urb. Court Yard #9		Transaction ID : SA11AI.8375	
City San Juan State PR Zip Code 00926	Amount of Each Receipt this Period 750.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Ferraiuoli LLC Lawyer		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) B. Boris Jaskille		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 18 / 2012	
Mailing Address 225 Tulip St. Urb. Court Yard #9		Transaction ID : SA11AI.8389	
City San Juan State PR Zip Code 00926	Amount of Each Receipt this Period 321.93		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Ferraiuoli LLC Lawyer		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1071.93		
In-kind - Fundraising Expenses-Meals			

Full Name (Last, First, Middle Initial) C. Emilio Jimenez		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 24 / 2012	
Mailing Address P.O. Box 22678		Transaction ID : SA11AI.8283	
City San Juan State PR Zip Code 00931	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Self-Employed Medical Doctor		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00		

SUBTOTAL of Receipts This Page (optional).....	1571.93
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 63 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Milton Jimenez

Mailing Address Urb. Lakeview Estates

City State Zip Code
Caguas PR 00725

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OMEGA Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 24 / 2012

Transaction ID : SA11AI.8321

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Lissette Lacomba

Mailing Address Villa de las Americas # 52
A-18

City State Zip Code
San Juan PR 00927

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Caribbean Restaurants LLC Finance Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2012

Transaction ID : SA11AI.8892

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
David Latoni Cabanillas

Mailing Address PO Box 1856

City State Zip Code
Mayaguez PR 00681

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 21 / 2012

Transaction ID : SA11AI.8054

Amount of Each Receipt this Period
500.00

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: (check only one)	PAGE 64 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Olvin Laureano

Mailing Address P.O. Box 1192

City Vega Baja State PR Zip Code 00693

FEC ID number of contributing federal political committee. **C**

Name of Employer MEM Occupation Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2012

Transaction ID : SA11A1.7522

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Vince Laureano

Mailing Address Palma Real Z-12

City Guaynabo State PR Zip Code 00960

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2012

Transaction ID : SA11A1.8290

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Vince Laureano

Mailing Address Palma Real Z-12

City Guaynabo State PR Zip Code 00960

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Engineer

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
 08 / 28 / 2012

Transaction ID : SA11A1.8292

Amount of Each Receipt this Period
500.00

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

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

1300.00

**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)	PAGE 65 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Jose Ledesma		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2012
Mailing Address PO Box 194089		Transaction ID : SA11AI.8387
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Ledesma, Vargas & Villarrubia	Occupation Lawyer	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Edrick D. Lopez Enriquez		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 15 / 2012
Mailing Address P.O. Box 29		Transaction ID : SA11AI.8058
City Mayaguez	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Medical Doctor-Rheumatologist	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) C. Rafael Lopez Pagan		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 24 / 2012
Mailing Address PO Box 699		Transaction ID : SA11AI.9732
City Barranquitas	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Medical Doctor	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 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: (check only one)	PAGE 66 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Hector Lopez Pumarejo		Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2012	
Mailing Address 252 Ponce de Leon Ave.		Transaction ID : SA11AI.9054	
City San Juan	State PR	Zip Code 00918	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer HLP Developers	Occupation Economist		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. Pedro Lorenzi		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2012	
Mailing Address P.O. Box 29508		Transaction ID : SA11AI.9806	
City San Juan	State PR	Zip Code 00929-0508	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Self-Employed	Occupation Medical Doctor		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. Pedro Lorenzi		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2012	
Mailing Address P.O. Box 29508		Transaction ID : SA11AI.8874	
City San Juan	State PR	Zip Code 00929-0508	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Self-Employed	Occupation Medical Doctor		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 67 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Sandra V Lugo

Mailing Address **Parque de Loyola PH-1202**

City **San Juan** State **PR** Zip Code **00918**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 10 / 2012

Transaction ID : SA11AI.9676

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Bruny Lugo de Perez

Mailing Address **Carr. 2 Km 168.2 Int. Box 1796**

City **San German** State **PR** Zip Code **00683**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Unemployed Retired

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
08 / 10 / 2012

Transaction ID : SA11AI.8078

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Lilliam Maldonado

Mailing Address **PO Box 8086 Urb. Las Veredas**

City **Caguas** State **PR** Zip Code **00726**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Comision Estatal de Elecciones Assistant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2018.70**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 24 / 2012

Transaction ID : SA11AI.9637

Amount of Each Receipt this Period
1918.70
 In-kind - Fundraising Expenses-Meals

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

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

3218.70

: 97 `A -G7 9 @ @ B9 CI G`H9 LH`F9 @ H98 `HC `5 `F9 DCFH`G7 <98 I @ `CF `H9 A -N5 H-CB

Form/Schedule: SA11AI

Transaction ID : SA11AI.9676

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

Form/Schedule:

Transaction ID:

**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 69 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Magdaly Maldonado de Oms

Mailing Address **Diamela 1800**
Urb. Santa Maria

City **San Juan** State **PR** Zip Code **00927**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Medical Doctor**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 12 / 2012

Transaction ID : SA11AI.8356

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Enrique Mangual

Mailing Address **Ave. Isla 3001**
PH 2401, Cond. Plaza del Mar

City **Carolina** State **PR** Zip Code **00797**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Kikuet** Occupation **Owner**

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
08 / 11 / 2012

Transaction ID : SA11AI.7964

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Enrique Mangual

Mailing Address **Ave. Isla 3001**
PH 2401, Cond. Plaza del Mar

City **Carolina** State **PR** Zip Code **00797**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Kikuet** Occupation **Owner**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 31 / 2012

Transaction ID : SA11AI.8503

Amount of Each Receipt this Period
700.00

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

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

2200.00

**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)	PAGE 70 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Victor Marcial Burgos

Mailing Address P.O. Box 360816

City San Juan State PR Zip Code 00936

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2012

Transaction ID : SA11AI.7714

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Agustin Marquez

Mailing Address Diamante St. A-30

City Guaynabo State PR Zip Code 00968

FEC ID number of contributing federal political committee. **C**

Name of Employer Pharmaceutical Industry Assn. Occupation Executive Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.9014

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Edgardo Marquez Lizardi

Mailing Address Cond. Monte Sur Apt.939
190 Ave Hostos

City San Juan State PR Zip Code 00918-4628

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2012

Transaction ID : SA11AI.7627

Amount of Each Receipt this Period
250.00

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: (check only one)	PAGE 71 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Carlos Marquez Rosario

Mailing Address Urb. Brisas d Montecasino
Caney 568

City Toa Alta State PR Zip Code 00953

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.9024

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Francisco Martin Caso

Mailing Address PMB 244
Garden Hills Plaza 1653

City Guaynabo State PR Zip Code 00966

FEC ID number of contributing federal political committee. **C**

Name of Employer Training Resources Corp. Occupation Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2012

Transaction ID : SA11AI.8381

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Rafael Martinez Margarida

Mailing Address Urb. Garden Hills
G6 Green Hill St.

City Guaynabo State PR Zip Code 00966

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Certified Public Accountant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.9100

Amount of Each Receipt this Period
400.00

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: (check only one)	PAGE 72 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Carlos Martinez Rodriguez

Mailing Address Urb. San Antonio
Daniela St. 2328

City Ponce State PR Zip Code 00728

FEC ID number of contributing federal political committee. **C**

Name of Employer US Army Occupation Colonel

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
 08 / 10 / 2012

Transaction ID : SA11AI.9673

Amount of Each Receipt this Period
1000.00

In-kind - Fundraising Expenses-Meals and Music

B. Full Name (Last, First, Middle Initial)
Rosadela Medina de Garity

Mailing Address Atalaya St. D-11

City Guaynabo St. State PR Zip Code 00966

FEC ID number of contributing federal political committee. **C**

Name of Employer unemployed Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1150.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2012

Transaction ID : SA11AI.7926

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Elliot Melecio

Mailing Address Paseo Los Corales
633 Mar de Bearing

City Dorado State PR Zip Code 00646

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 19 / 2012

Transaction ID : SA11AI.9531

Amount of Each Receipt this Period
500.00

Contribution via Internet (PayPal)

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

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

1650.00

**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)	PAGE 73 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Elliot Melecio		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2012
Mailing Address Paseo Los Corales 633 Mar de Bearing		Transaction ID : SA11AI.9508
City Dorado State PR Zip Code 00646	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Contribution via Internet (ACH)
Name of Employer Self-Employed	Occupation Medical Doctor	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 650.00	

Full Name (Last, First, Middle Initial) B. Elliot Melecio		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2012
Mailing Address Paseo Los Corales 633 Mar de Bearing		Transaction ID : SA11AI.9521
City Dorado State PR Zip Code 00646	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Contribution via Internet (ACH)
Name of Employer Self-Employed	Occupation Medical Doctor	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) C. Victor Luis Mena Rivera		Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address Caparra Hills Calle Bucare H-11		Transaction ID : SA11AI.9105
City Guaynabo State PR Zip Code 00968	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Contribution via Internet (ACH)
Name of Employer Self-Employed	Occupation Baker	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 74 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) Niso Menda Cohen		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 22 / 2012
Mailing Address 20 Carrion Ct. Apt 402		Transaction ID : SA11AI.9245
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self-Employed	Occupation Retailer	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) Jose L. Mendoza		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 08 / 2012
Mailing Address PO Box 190476		Transaction ID : SA11AI.8130
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Jose Luis Mendoza & Co.	Occupation Certified Public Accountant	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) Jose L. Mendoza		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 13 / 2012
Mailing Address PO Box 190476		Transaction ID : SA11AI.9074
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Jose Luis Mendoza & Co.	Occupation Certified Public Accountant	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 650.00	

SUBTOTAL of Receipts This Page (optional).....	950.00
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: (check only one)	PAGE 75 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Roberto Mendoza

Mailing Address **Costa Verde 38**
Palmas del Mar

City **Humacao** State **PR** Zip Code **00791**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Vaqueria GRJ** Occupation **Farmer**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 11 / 2012

Transaction ID : SA11AI.7954

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Josue Mercado Crespo

Mailing Address **Cond. Plaza del Mar**
3001 Isla Verde Ave. Apt. 3001

City **Carolina** State **PR** Zip Code **00979**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Medical Doctor**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 10 / 2012

Transaction ID : SA11AI.8566

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Andres Miranda Rodriguez

Mailing Address **PO Box 6570**

City **Caguas** State **PR** Zip Code **00725**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Quality Electro Planting Corp.** Occupation **President**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 24 / 2012

Transaction ID : SA11AI.9261

Amount of Each Receipt this Period
200.00

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

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

3200.00

**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)	PAGE 76 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Ada Miranda Velazquez

Mailing Address 243 Paris St. PMB 1277

City San Juan State PR Zip Code 00917

FEC ID number of contributing federal political committee. **C**

Name of Employer University of Puerto Rico Occupation Administrative Assistant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1003.75**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2012

Transaction ID : SA11AI.9642

Amount of Each Receipt this Period
500.00

In-kind - Fundraising Expenses-Rent

B. Full Name (Last, First, Middle Initial)
Ada Miranda Velazquez

Mailing Address 243 Paris St. PMB 1277

City San Juan State PR Zip Code 00917

FEC ID number of contributing federal political committee. **C**

Name of Employer University of Puerto Rico Occupation Administrative Assistant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **503.75**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2012

Transaction ID : SA11AI.9644

Amount of Each Receipt this Period
503.75

In-kind - Fundraising Expenses-Meals

C. Full Name (Last, First, Middle Initial)
Ada Miranda Velazquez

Mailing Address 243 Paris St. PMB 1277

City San Juan State PR Zip Code 00917

FEC ID number of contributing federal political committee. **C**

Name of Employer University of Puerto Rico Occupation Administrative Assistant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1023.75**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2012

Transaction ID : SA11AI.8601

Amount of Each Receipt this Period
20.00

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

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

1023.75

**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 77 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)
Joaquin Monserrate Matienzo

Mailing Address **Munoz Rivera Ave. 606**

City **San Juan** State **PR** Zip Code **00918**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Monserrate Law Firm** Occupation **Lawyer**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 09 / 2012

Transaction ID : SA11AI.8546

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Manuel D. Montalvo

Mailing Address **1733 Ave. Jesus T. Pinero**

City **San Juan** State **PR** Zip Code **00918**

FEC ID number of contributing federal political committee. **C**

Name of Employer **self employed** Occupation **Certified Public Accountant**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 13 / 2012

Transaction ID : SA11AI.9087

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Jose Montalvo Trias

Mailing Address **Parque Loyola 1505**

City **Hato Rey** State **PR** Zip Code **00918**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Attorney**

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
09 / 26 / 2012

Transaction ID : SA11AI.10904

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.10904

Erroneously this activity was not disclosed correctly on the original report. Cox Alomar 2012, Inc. noticed an error on the Cash-on-Hand reflected on the Year-End Report. Immediately, began a check-by-check, contribution-by-contribution review from the July Quaterly through Year-End periods. As a result, the Committee proceeded to amend the Reports in order to correct the reporting errors and fulfill the reporting requirements established on 11 CFR 104.3. The Committee changed its internal policy and the contributions recieved are required to be part of a complete report for compliance staff within 24 hours after the contribution is made. Reporting staff is requested to made the entries on FEC File system within the next 48 hours after receiving the report

Form/Schedule:

Transaction ID:

**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 79 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Jose Montes

Mailing Address 1713 Lilas St.

City San Juan State PR Zip Code 00927

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation 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 Y Y
 08 / 27 / 2012

Transaction ID : SA11AI.7833

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Evaristo Morales

Mailing Address PO Box 36307642

City San Juan State PR Zip Code 00936

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 14 / 2012

Transaction ID : SA11AI.9043

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Joerel Morales Cruz

Mailing Address Degetau Ave. A-3 Bonnterrace

City Caguas State PR Zip Code 00725

FEC ID number of contributing federal political committee. **C**

Name of Employer Seguros Joerel Morales Occupation Insurance Agent

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2012

Transaction ID : SA11AI.8031

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: (check only one)	PAGE 80 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Joerel Morales Cruz

Mailing Address Degetau Ave. A-3
Bonnterrace

City State Zip Code
Caguas PR 00725

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Seguros Joerel Morales Insurance Agent

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 30 / 2012

Transaction ID : SA11AI.8502

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Andres Muniz

Mailing Address 232 Rey Fernando
Villa de Torrimar

City State Zip Code
Guaynabo PR 00969

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Kinesis Executive

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 12 / 2012

Transaction ID : SA11AI.7840

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Andres Muniz

Mailing Address 232 Rey Fernando
Villa de Torrimar

City State Zip Code
Guaynabo PR 00969

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Kinesis Executive

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
09 / 12 / 2012

Transaction ID : SA11AI.7842

Amount of Each Receipt this Period
500.00

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

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

2000.00

**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)	PAGE 81 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Carlos Muniz		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 18 / 2012	
Mailing Address Sabanera Dorado 476 Camino de la Vega City Dorado State PR Zip Code 00646		Transaction ID : SA11AI.8385	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Occupation Ferraiuoli LLC Lawyer			
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Andres Muniz Colon		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 27 / 2012	
Mailing Address 232 Rey Fernando La Villa de Torrimar City Guaynabo State PR Zip Code 00969		Transaction ID : SA11AI.9631	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 816.61 In-kind - Fundraising Expenses-Meals	
Name of Employer Occupation Kinesis Executive Director			
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 999.99	

Full Name (Last, First, Middle Initial) C. Antonio Munoz Bermudez		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 01 / 2012	
Mailing Address PO Box 363148 City San Juan State PR Zip Code 00936		Transaction ID : SA11AI.9819	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Occupation Munoz Holdings, Inc. President			
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	2316.61
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 82 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Antonio Munoz Bermudez

Mailing Address PO Box 363148

City San Juan State PR Zip Code 00936

FEC ID number of contributing federal political committee. **C**

Name of Employer Munoz Holdings, Inc. Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2012

Transaction ID : SA11AI.9824

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Enid Munoz Mejias

Mailing Address Caparra Classic Apto. 1101
Ortegon Ave. Num. 105

City Guaynabo State PR Zip Code 00966

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

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
 08 / 16 / 2012

Transaction ID : SA11AI.7569

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Angel Munoz Noya

Mailing Address Urb. Paseo Mayor
4 St. B-33

City San Juan State PR Zip Code 00926

FEC ID number of contributing federal political committee. **C**

Name of Employer Sanchez Betances Sifre & Munoz Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 17 / 2012

Transaction ID : SA11AI.7574

Amount of Each Receipt this Period
500.00

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

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

1750.00

**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)	PAGE 83 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Gilda Nadal

Mailing Address PO Box 360964

City San Juan State PR Zip Code 00936

FEC ID number of contributing federal political committee. **C**

Name of Employer Sucesion J.A. Nadal-Geigel Occupation Administrator

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 07 / 2012

Transaction ID : SA11AI.8422

Amount of Each Receipt this Period
300.00

In-kind - Fundraising expenses-Meals

B. Full Name (Last, First, Middle Initial)
Marina Nadal

Mailing Address PO Box 361700

City San Juan State PR Zip Code 00936-1700

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 02 / 2012

Transaction ID : SA11AI.7598

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Gilda Nadal Vazquez

Mailing Address PO Box 360964

City San Juan State PR Zip Code 00936-0964

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 24 / 2012

Transaction ID : SA11AI.8519

Amount of Each Receipt this Period
500.00

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

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

925.00

**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)	PAGE 84 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Jose A. Nassar

Mailing Address Box 9132

City Humacao State PR Zip Code 00792

FEC ID number of contributing federal political committee. **C**

Name of Employer Jose A. Nassar & Associates Occupation Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2012

Transaction ID : SA11AI.8094

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
Carlos Nassar Yumet

Mailing Address PO Box 9132

City Humacao State PR Zip Code 00792

FEC ID number of contributing federal political committee. **C**

Name of Employer Jose A. Nassar & Associates Occupation Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2012

Transaction ID : SA11AI.8098

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Jose R. Nassar Yumet

Mailing Address Po Box 9132

City Humacao State PR Zip Code 00792

FEC ID number of contributing federal political committee. **C**

Name of Employer Jose A. Nassar & Associates Occupation Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2012

Transaction ID : SA11AI.8096

Amount of Each Receipt this Period
400.00

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

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

1200.00

**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)	PAGE 85 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Jorge Nazario		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 18 / 2012
Mailing Address PO Box 70198		Transaction ID : SA11AI.8369
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer CEGSOFT	Occupation Executive	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Pedro Nicot Santana		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 12 / 2012
Mailing Address PO Box 360486		Transaction ID : SA11AI.8353
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Self-Employed	Occupation Lawyer	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 550.00	

Full Name (Last, First, Middle Initial) C. Pedro Nicot Santana		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 12 / 2012
Mailing Address PO Box 360486		Transaction ID : SA11AI.8607
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 359.00
Name of Employer Self-Employed	Occupation Lawyer	In-kind - Fundraising Expenses-Meals
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 909.00	

SUBTOTAL of Receipts This Page (optional).....	659.00
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: (check only one)	PAGE 86 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Eduardo Ojeda

Mailing Address Urb. Isabella Los Prados
60 Grand Boulevard

City Caguas State PR Zip Code 00727

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2012

Transaction ID : SA11AI.10895

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Rafael Ojeda

Mailing Address Las Violetas 2003

City San Juan State PR Zip Code 00915

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Unemployed Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2012

Transaction ID : SA11AI.9098

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Citlatin Olivares

Mailing Address PO Box 360994

City San Juan State PR Zip Code 00936-0994

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ESI Executive

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2012

Transaction ID : SA11AI.8301

Amount of Each Receipt this Period
 2500.00

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

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

3000.00

: 97 `A -G7 9 @ @ B9 CI G`H9 LH`F9 @ H98 `HC `5 `F9 DCFH`ZG7 <98 I @ `CF `H9 A -N5 H-CB

Form/Schedule: SA11AI

Transaction ID : SA11AI.10895

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

Form/Schedule:

Transaction ID:

**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 88 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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

Full Name (Last, First, Middle Initial) A. Humberto Olivencia Rabell		Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2012	
Mailing Address Edif. La Palma Ofic. 2-B		Transaction ID : SA11AI.8072	
City Mayaguez	State PR	Zip Code 00680	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Self-Employed	Occupation Medical Doctor		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. Ruddy Oquendo		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2012	
Mailing Address PO Box 8389		Transaction ID : SA11AI.7979	
City Humacao	State PR	Zip Code 00792-8389	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00	
Name of Employer Self-Employed	Occupation Medical Doctor		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) C. Ruddy Oquendo		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2012	
Mailing Address PO Box 8389		Transaction ID : SA11AI.8012	
City Humacao	State PR	Zip Code 00792-8389	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00	
Name of Employer Self-Employed	Occupation Medical Doctor		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00		

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 89 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)
Maria J. Oquendo Delgado

Mailing Address PO Box 9021712

City San Juan State PR Zip Code 00902-1712

FEC ID number of contributing federal political committee. **C**

Name of Employer: Empresas Intec Puerto Rico Occupation: President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 12 / 2012

Transaction ID : SA11AI.7801

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Maria J. Oquendo Delgado

Mailing Address PO Box 9021712

City San Juan State PR Zip Code 00902-1712

FEC ID number of contributing federal political committee. **C**

Name of Employer: Empresas Intec Puerto Rico Occupation: President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 450.00

Date of Receipt: 07 / 12 / 2012

Transaction ID : SA11AI.9792

Amount of Each Receipt this Period: 200.00

In-kind - Purchase of Pins

C. Full Name (Last, First, Middle Initial)
Maria J. Oquendo Delgado

Mailing Address PO Box 9021712

City San Juan State PR Zip Code 00902-1712

FEC ID number of contributing federal political committee. **C**

Name of Employer: Empresas Intec Puerto Rico Occupation: President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 550.00

Date of Receipt: 07 / 15 / 2012

Transaction ID : SA11AI.8581

Amount of Each Receipt this Period: 100.00

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

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

400.00

**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)	PAGE 90 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)
Maria J. Oquendo Delgado

Mailing Address PO Box 9021712

City San Juan State PR Zip Code 00902-1712

FEC ID number of contributing federal political committee. **C**

Name of Employer: **Empresas Intec Puerto Rico** Occupation: **President**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: **675.00**

Date of Receipt: **07 / 30 / 2012**

Transaction ID : SA11AI.7634

Amount of Each Receipt this Period: **125.00**

B. Full Name (Last, First, Middle Initial)
Maria J. Oquendo Delgado

Mailing Address PO Box 9021712

City San Juan State PR Zip Code 00902-1712

FEC ID number of contributing federal political committee. **C**

Name of Employer: **Empresas Intec Puerto Rico** Occupation: **President**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: **825.00**

Date of Receipt: **08 / 22 / 2012**

Transaction ID : SA11AI.7888

Amount of Each Receipt this Period: **150.00**

C. Full Name (Last, First, Middle Initial)
Maria J. Oquendo Delgado

Mailing Address PO Box 9021712

City San Juan State PR Zip Code 00902-1712

FEC ID number of contributing federal political committee. **C**

Name of Employer: **Empresas Intec Puerto Rico** Occupation: **President**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: **845.00**

Date of Receipt: **09 / 07 / 2012**

Transaction ID : SA11AI.8471

Amount of Each Receipt this Period: **20.00**

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

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

295.00

**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)	PAGE 91 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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

Full Name (Last, First, Middle Initial) A. Dolores Oronoz		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 16 / 2012	
Mailing Address Torrimar Bambu K-4		Transaction ID : SA11AI.8957	
City Guaynabo	State PR	Zip Code 00966	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer Unemployed	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) B. Mario Oronoz		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 16 / 2012	
Mailing Address Torrimar Alto Bamboo K4		Transaction ID : SA11AI.8958	
City Guaynabo	State PR	Zip Code 00966	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Self-Employed	Occupation Lawyer		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1013.93		

Full Name (Last, First, Middle Initial) C. Glorimar Ortiz Marrero		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 10 / 2012	
Mailing Address HC 01 Box 5144		Transaction ID : SA11AI.9724	
City Barranquitas	State PR	Zip Code 00794	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self-Employed	Occupation Authorized Public Accountant		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

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

FOR LINE NUMBER: PAGE 92 OF 311
(check only one)
 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)
Juan Ortiz Matos

Mailing Address PO Box 1117

City State Zip Code
Corozal PR 00783

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Centro de Medicina Interna Medical Doctor

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
 08 / 01 / 2012

Transaction ID : SA11AI.9710

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Hector Ortiz Ortiz

Mailing Address PO Box 9121

City State Zip Code
Humacao PR 00792

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Centro Sicologico del Sur Este President

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
 09 / 30 / 2012

Transaction ID : SA11AI.10902

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Maribel Ortiz Palacios

Mailing Address Urb. Cerro Real
7-M St.

City State Zip Code
Guaynabo PR 00969

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Unemployed Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 12 / 2012

Transaction ID : SA11AI.8568

Amount of Each Receipt this Period
2500.00

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

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

4500.00

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.10902

Erroneously this activity was not disclosed correctly on the original report. Cox Alomar 2012, Inc. noticed an error on the Cash-on-Hand reflected on the Year-End Report. Immediately, began a check-by-check, contribution-by-contribution review from the July Quaterly through Year-End periods. As a result, the Committee proceeded to amend the Reports in order to correct the reporting errors and fulfill the reporting requirements established on 11 CFR 104.3. The Committee changed its internal policy and the contributions recieved are required to be part of a complete report for compliance staff within 24 hours after the contribution is made. Reporting staff is requested to made the entries on FEC File system within the next 48 hours after receiving the report

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 94 OF 311
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Angel Ortiz Zayas

Mailing Address Cond. Alturas del Bosque
350 Carr. 844 Apt. 5604

City San Juan State PR Zip Code 00926

FEC ID number of contributing federal political committee. **C**

Name of Employer Design Build S.E. Occupation Project Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2012

Transaction ID : SA11AI.8002

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Sylvia Otero

Mailing Address PMB 132 Box 3802

City Ciales State PR Zip Code 00638

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2012

Transaction ID : SA11AI.8431

Amount of Each Receipt this Period
240.00

C. Full Name (Last, First, Middle Initial)
Jose Pagan

Mailing Address Urb. Alto Apolo 212
Lerna St.

City Guaynabo State PR Zip Code 00969

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation 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 Y Y
 08 / 22 / 2012

Transaction ID : SA11AI.7843

Amount of Each Receipt this Period
500.00

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

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

2740.00

: 97 `A -G7 9 @ @ B9 CI G`H9 LH`F9 @ H98 `HC `5 `F9 DCFH`ZG7 <98 I @ `CF `H9 A -N5 H-CB

Form/Schedule: SA11AI

Transaction ID : SA11AI.8431

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

Form/Schedule:

Transaction ID:

**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 96 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Heriberto Pagan Saez		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 16 / 2012	
Mailing Address Urb. Sagrado Corazon San Julian St # 1619		Transaction ID : SA11AI.8930	
City San Juan State PR Zip Code 00926	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C	Name of Employer self employed Occupation Physician		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1400.00		

Full Name (Last, First, Middle Initial) B. Maria Palau		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 06 / 2012	
Mailing Address P.O. Box 448		Transaction ID : SA11AI.8010	
City Guayama State PR Zip Code 00785	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Name of Employer Unemployed Occupation Homemaker		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. Leonides Parrilla		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 24 / 2012	
Mailing Address Cristolita U-11 Villa Blanca		Transaction ID : SA11AI.9257	
City Caguas State PR Zip Code 00725	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C	Name of Employer Cristo de los Milagros Academy Occupation General Director and Professor		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 97 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Jaime Pedraza Pena		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 25 / 2012
Mailing Address 37 Munoz Rivera St.		Transaction ID : SA11AI.9718
City Barranquitas	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Medical Doctor	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Doris Pena Senati		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 27 / 2012
Mailing Address Urb. estancias de Rio Calle Jacaguas		Transaction ID : SA11AI.8323
City Aguas Buenas	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Farmacia Comunidad	Occupation Pharmacist	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Jose Pena Torres		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 25 / 2012
Mailing Address HC 01 Box 5267		Transaction ID : SA11AI.9702
City Orocovis	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Almacen Pena	Occupation Executive	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1500.00
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 98 OF 311
(check only one)
 11a 11b 11c 11d
 12 13a 13b 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)
Carlos Pineiro Crespo

Mailing Address Urb. Montehiedra
161 Pitirre St.

City San Juan State PR Zip Code 00926

FEC ID number of contributing federal political committee. **C**

Name of Employer HIMA Occupation President

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
 09 / 05 / 2012

Transaction ID : SA11AI.10891

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Marcos Polanco

Mailing Address 1607 Colon St. #101

City San Juan State PR Zip Code 00911

FEC ID number of contributing federal political committee. **C**

Name of Employer Albedrio Occupation Executive

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2012

Transaction ID : SA11AI.8363

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Marisara Pont

Mailing Address Urb. Baldrich
206 Presidente Ramirez St.

City San Juan State PR Zip Code 00918

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation 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 Y Y
 08 / 22 / 2012

Transaction ID : SA11AI.7828

Amount of Each Receipt this Period
500.00

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

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

1750.00

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.10891

Erroneously this activity was not disclosed correctly on the original report. Cox Alomar 2012, Inc. noticed an error on the Cash-on-Hand reflected on the Year-End Report. Immediately, began a check-by-check, contribution-by-contribution review from the July Quaterly through Year-End periods. As a result, the Committee proceeded to amend the Reports in order to correct the reporting errors and fulfill the reporting requirements established on 11 CFR 104.3. The Committee changed its internal policy and the contributions recieved are required to be part of a complete report for compliance staff within 24 hours after the contribution is made. Reporting staff is requested to made the entries on FEC File system within the next 48 hours after receiving the report

Form/Schedule:

Transaction ID:

**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 100 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)
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-employed** Occupation **Engineer**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2900.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 13 / 2012

Transaction ID : SA11AI.9106

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
Roberto Prats Palerm

Mailing Address **1506 Martin Travieso**

City **San Juan** State **PR** Zip Code **00911**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Attorney**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 02 / 2012

Transaction ID : SA11AI.8534

Amount of Each Receipt this Period
1250.00

C. Full Name (Last, First, Middle Initial)
Yoly Prohias

Mailing Address **PO Box 192273**

City **San Juan** State **PR** Zip Code **00919**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Chef**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2117.24**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 15 / 2012

Transaction ID : SA11AI.9681

Amount of Each Receipt this Period
1850.00
 In-kind - Fundraising Expenses-Meals

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

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

3500.00

**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)	PAGE 101 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Yoly Prohias

Mailing Address **PO Box 192273**

City **San Juan** State **PR** Zip Code **00919**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Chef**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
267.24

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 15 / 2012

Transaction ID : SA11AI.9683

Amount of Each Receipt this Period
267.24
 In-kind - Fundraising Expenses-Beverages

B. Full Name (Last, First, Middle Initial)
Margarita Pumarada Surillo

Mailing Address **Cond. Palma Real Apt. 7**

City **San Juan** State **PR** Zip Code **00907**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Unemployed** Occupation **Retired**

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
08 / 22 / 2012

Transaction ID : SA11AI.7837

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Isis Quinones

Mailing Address **Calle Luchetti 1308
Apto. 501**

City **San Juan** State **PR** Zip Code **00907**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Producer**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 22 / 2012

Transaction ID : SA11AI.7892

Amount of Each Receipt this Period
400.00

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

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

1667.24

**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 102 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Isis Quinones

Mailing Address Calle Luchetti 1308
Apto. 501

City San Juan State PR Zip Code 00907

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Producer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 22 / 2012

Transaction ID : SA11AI.7894

Amount of Each Receipt this Period
225.00

B. Full Name (Last, First, Middle Initial)
Edwin Quinones Rivera

Mailing Address Urb. Gardens Hills
Hastings St. Z-21

City Guaynabo State PR Zip Code 00966

FEC ID number of contributing federal political committee. **C**

Name of Employer Quinonez & Arbona Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 01 / 2012

Transaction ID : SA11AI.9804

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Miguel Ramirez Cuevas

Mailing Address PO Box 8921

City San Juan State PR Zip Code 00910

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 27 / 2012

Transaction ID : SA11AI.7630

Amount of Each Receipt this Period
125.00

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

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

450.00

**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)	PAGE 103 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Jeannette Ramos		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 13 / 2012
Mailing Address PO Box 191875		Transaction ID : SA11AI.9068
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Self-Employed	Occupation Lawyer	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Rafael Ramos		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 11 / 2012
Mailing Address HC 23 Box 6576		Transaction ID : SA11AI.9746
City Juncos	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Self-Employed	Occupation Medical Doctor	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) C. Hector Ramos Torres		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 28 / 2012
Mailing Address PO Box 849		Transaction ID : SA11AI.9730
City Barranquitas	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Engineer	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 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: (check only one)	PAGE 104 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Carlos Remedios Carbone		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 11 / 2012	
Mailing Address PO Box 200 PMB 140		Transaction ID : SA11AI.7975	
City Ponce State PR Zip Code 00715-0715	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed Occupation Medical Doctor		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) B. Erasmo Reyes		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 11 / 2012	
Mailing Address Suite 1400 Ave. Ponce de Leon		Transaction ID : SA11AI.7934	
City San Juan State PR Zip Code 00918	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed Occupation Attorney		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) C. Mayra Rios de Alcaraz		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 15 / 2012	
Mailing Address 23 Betances		Transaction ID : SA11AI.8059	
City Aguadilla State PR Zip Code 00603	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Name of Employer Nine West Eyewear Occupation Manager		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	1200.00
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: (check only one)		PAGE 105 OF 311	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Carlos R. Rios Gautier

Mailing Address 27 Gonzalez Giusti Ave. Suite 300

City Guaynabo	State PR	Zip Code 00968
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Rios, Gautier & Cesteros CSP	Occupation Attorney
--	------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		13		2012

Transaction ID : SA11A1.9031

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Carlos R. Rios Gautier

Mailing Address 27 Gonzalez Giusti Ave. Suite 300

City Guaynabo	State PR	Zip Code 00968
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Rios, Gautier & Cesteros CSP	Occupation Attorney
--	------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		16		2012

Transaction ID : SA11A1.8968

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Victoria Rios Ramos

Mailing Address Urb. Baldrich
Manuel Rossi St.

City Hato Rey	State PR	Zip Code 00918
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer self employed	Occupation Accountant
-----------------------------------	--------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2012

Transaction ID : SA11A1.7614

Amount of Each Receipt this Period
250.00

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: (check only one)	PAGE 106 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Ana C. Rius Armendariz

Mailing Address Urb. Santa Clara
Roble Blanco St. F-11

City Guaynabo State PR Zip Code 00969

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **723.01**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 12 / 2012

Transaction ID : SA11AI.7718

Amount of Each Receipt this Period
 379.01

In-kind - Fundraising expenses Meals

B. Full Name (Last, First, Middle Initial)
Ana C. Rius Armendariz

Mailing Address Urb. Santa Clara
Roble Blanco St. F-11

City Guaynabo State PR Zip Code 00969

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **344.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 12 / 2012

Transaction ID : SA11AI.7719

Amount of Each Receipt this Period
 294.00

In-kind - Fundraising expenses rentals

C. Full Name (Last, First, Middle Initial)
Ana Rivera

Mailing Address Costa Verde #37
Palmas del Mar

City Humacao State PR Zip Code 00791

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Homemaker

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
 07 / 11 / 2012

Transaction ID : SA11AI.8553

Amount of Each Receipt this Period
 1000.00

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

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

1673.01

**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 107 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Nestor Rivera

Mailing Address PO Box 360994

City San Juan State PR Zip Code 00936-0994

FEC ID number of contributing federal political committee. **C**

Name of Employer ESI Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2012

Transaction ID : SA11AI.8303

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Felix M. Rivera Borges

Mailing Address PO Box 3181

City Mayaguez State PR Zip Code 00681-3181

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 24 / 2012

Transaction ID : SA11AI.8069

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Jaime Rivera Cartajena

Mailing Address PO Box 787

City Barranquitas State PR Zip Code 00705

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2012

Transaction ID : SA11AI.9712

Amount of Each Receipt this Period
500.00

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

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

3500.00

**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)		PAGE 108 OF 311	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Juan R. Rivera Font

Mailing Address Sabanera Dorado
Camino de la Cana #133

City Dorado State PR Zip Code 00646

FEC ID number of contributing federal political committee. **C**

Name of Employer Ferraiuoli LLC Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 16 / 2012

Transaction ID : SA11AI.8918

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Roxana Rivera Gierbolini

Mailing Address Urb. Las Veredas
658 Camino de los Jazmines

City Gurabo State PR Zip Code 00778

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 08 / 2012

Transaction ID : SA11AI.10897

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Luis Rivera Hernandez

Mailing Address Los Arboles Boulevard 438

City San Juan State PR Zip Code 00926

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 12 / 2012

Transaction ID : SA11AI.10910

Amount of Each Receipt this Period
500.00

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

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

950.00

: 97 `A =G7 9 @C B9 CI G`H9 LHF9 @ H98 `HC `5 `F9 DCFH ZG7 <98 I @ `CF `H9 A =N5 HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.10897

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

Form/Schedule: SA11AI

Transaction ID: SA11AI.10910

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Mae Rivera Janer

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 unemployed Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 22 / 2012

Transaction ID : SA11AI.7883

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
Elisamuel Rivera Rivera

Mailing Address P.O. Box 1080

City Mayaguez State PR Zip Code 00681

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Certified Public Accountant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 24 / 2012

Transaction ID : SA11AI.8065

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Joaquin Rodriguez

Mailing Address Palmas del Mar 11 Ridge Top Dr.

City Humacao State PR Zip Code 00791-6059

FEC ID number of contributing federal political committee. **C**

Name of Employer HimaHealth Puerto Rico Occupation CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 11 / 2012

Transaction ID : SA11AI.7932

Amount of Each Receipt this Period
500.00

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

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

1075.00

**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)	PAGE 111 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Joaquin Rodriguez

Mailing Address **Palmas del Mar 11 Ridge Top Dr.**

City **Humacao** State **PR** Zip Code **00791-6059**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HimaHealth Puerto Rico** Occupation **CEO**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 05 / 2012

Transaction ID : SA11AI.7839

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Joaquin Rodriguez

Mailing Address **Palmas del Mar 11 Ridge Top Dr.**

City **Humacao** State **PR** Zip Code **00791-6059**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HimaHealth Puerto Rico** Occupation **CEO**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 16 / 2012

Transaction ID : SA11AI.8910

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Juan Rodriguez

Mailing Address **Dorado Beach Estates Lote 14**

City **Dorado** State **PR** Zip Code **00646**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Retailer**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 31 / 2012

Transaction ID : SA11AI.8571

Amount of Each Receipt this Period
500.00

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

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

1700.00

**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)	PAGE 112 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Magda Rodriguez

Mailing Address Apartado 1175

City Lajas State PR Zip Code 00667

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Certified Public Accountant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 20 / 2012

Transaction ID : SA11AI.8056

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Wallace Rodriguez

Mailing Address 650 Munox Rivera Ave. Suite 502

City San Juan State PR Zip Code 00918

FEC ID number of contributing federal political committee. **C**

Name of Employer Parissi PSC Occupation Authorized Public Accountant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 14 / 2012

Transaction ID : SA11AI.9107

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Luis Rodriguez Carrasquillo

Mailing Address PO Box 3762

City Carolina State PR Zip Code 00984

FEC ID number of contributing federal political committee. **C**

Name of Employer Policlinica Occupation Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 03 / 2012

Transaction ID : SA11AI.8538

Amount of Each Receipt this Period
 2500.00

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

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

3250.00

**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)	PAGE 113 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Carlos Rodriguez Lodeiro		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 13 / 2012
Mailing Address A-10 Pero Pedroza St. Garden Hills North		Transaction ID : SA11AI.9026
City Guaynabo	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Lopito, Ileana & Howie	Occupation President	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Hector Rodriguez Ortiz		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 28 / 2012
Mailing Address 14 Barcelo St.		Transaction ID : SA11AI.9700
City Barranquitas	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Farmacia Pedraza	Occupation Pharmacist	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C. Graciela Roig		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 11 / 2012
Mailing Address HC 2 Box 13433		Transaction ID : SA11AI.7933
City Humacao	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer University of Puerto Rico	Occupation Professor	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1650.00
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: (check only one)	PAGE 114 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) Freddie H. Roman Aviles		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 26 / 2012	
Mailing Address 14 Peral St. N suite 1-E		Transaction ID : SA11AI.8071	
City Mayaguez	State PR	Zip Code 00680	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self-Employed	Occupation Medical Doctor		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00		

Full Name (Last, First, Middle Initial) Jeannette Roman Ponton		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 14 / 2012	
Mailing Address Cond. Plaza del Prado 11 5 Carr. 833 Apt. 403		Transaction ID : SA11AI.7566	
City Guaynabo	State PR	Zip Code 00969-3001	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Unemployed	Occupation Homemaker		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1075.00		

Full Name (Last, First, Middle Initial) Jeannette Roman Ponton		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 22 / 2012	
Mailing Address Cond. Plaza del Prado 11 5 Carr. 833 Apt. 403		Transaction ID : SA11AI.7889	
City Guaynabo	State PR	Zip Code 00969-3001	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer Unemployed	Occupation Homemaker		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1225.00		

SUBTOTAL of Receipts This Page (optional).....	1650.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 115 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Jesus Romero Perez		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2012	
Mailing Address PO Box 4129		Transaction ID : SA11AI.8074	
City Mayaguez	State PR	Zip Code 00681-4129	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500.00	
Name of Employer Self-Employed	Occupation Doctor		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. Jesus Romero Perez		Date of Receipt M M / D D / Y Y Y Y 08 / 26 / 2012	
Mailing Address PO Box 4129		Transaction ID : SA11AI.8814	
City Mayaguez	State PR	Zip Code 00681-4129	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 200.00	
Name of Employer Self-Employed	Occupation Doctor		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00		

Full Name (Last, First, Middle Initial) C. Asbertly Rosa		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2012	
Mailing Address Cond San Geronimo 860 Ave Ashford Apt. 5B		Transaction ID : SA11AI.8006	
City San Juan	State PR	Zip Code 00907	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00	
Name of Employer self employed	Occupation General Consultant		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1300.00		

SUBTOTAL of Receipts This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 116 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Monica Rosa		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 18 / 2012	
Mailing Address Paseo Las Vistas 2C57		Transaction ID : SA11AI.8371	
City San Juan	State PR	Zip Code 00926	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00	
Name of Employer Self-Employed	Occupation Lawyer		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) B. Angel Luis Rosas		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 14 / 2012	
Mailing Address P.O. Box 470		Transaction ID : SA11AI.8808	
City Mayaguez	State PR	Zip Code 00681	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 940.00		

Full Name (Last, First, Middle Initial) C. Angel Luis Rosas		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 26 / 2012	
Mailing Address P.O. Box 470		Transaction ID : SA11AI.8045	
City Mayaguez	State PR	Zip Code 00681	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1190.00		

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 117 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Carmen Rossi

Mailing Address **PO Box 382**

City **Housatonic** State **MA** Zip Code **01236-0382**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Unemployed** Occupation **Homemaker**

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
08 / 22 / 2012

Transaction ID : SA11AI.7813

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Jose E. Rossi

Mailing Address **Urb. Torrimar 1311 Santander**

City **Guaynabo** State **PR** Zip Code **00966**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Construction Consultant**

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
07 / 27 / 2012

Transaction ID : SA11AI.8330

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Jose E. Rossi

Mailing Address **Urb. Torrimar 1311 Santander**

City **Guaynabo** State **PR** Zip Code **00966**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Construction Consultant**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 22 / 2012

Transaction ID : SA11AI.7826

Amount of Each Receipt this Period
500.00

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

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

2500.00

**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)		PAGE 118 OF 311	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) Victoria C Rossi		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 22 / 2012
Mailing Address Urb. Torrimar 1311 Santander		Transaction ID : SA11AI.7822
City Guaynabo	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Unemployed	Occupation Retired	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Efrain Rotgon		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 11 / 2012
Mailing Address Box 555		Transaction ID : SA11AI.7969
City Rio Blanco, Humacao	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Self-Employed	Occupation Farmer	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) Salvador Rovira Rodriguez		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 08 / 2012
Mailing Address PO Box 800970		Transaction ID : SA11AI.8686
City Coto Laurel	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer Rovira Luna Group	Occupation President	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2250.00	

SUBTOTAL of Receipts This Page (optional).....	2850.00
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: (check only one)	PAGE 119 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Gabriel Ruiz

Mailing Address 1510 FD Roosevelt Ave.

City State Zip Code
Guaynabo PR 00968

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2012

Transaction ID : SA11AI.8943

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
Reyes Ruiz

Mailing Address Box 603

City State Zip Code
Rio Blanco PR 00744

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Retailer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 11 / 2012

Transaction ID : SA11AI.8119

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Catalino Salas Quintana

Mailing Address PO Box 788

City State Zip Code
Hormigueros PR 00660

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
self employed Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 26 / 2012

Transaction ID : SA11AI.8044

Amount of Each Receipt this Period
500.00

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

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

1100.00

: 97 `A -G7 9 @ @ B9 CI G`H9 LH`F9 @ H98 `HC `5 `F9 DCFH`ZG7 <98 I @ `CF `H9 A -N5 H-CB

Form/Schedule: SA11AI

Transaction ID : SA11AI.8943

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

Form/Schedule:

Transaction ID:

**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 121 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Jaime Salas Soler

Mailing Address Alverio #559

City San Juan State PR Zip Code 00918

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.9062

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Alfredo Salazar Conde

Mailing Address PO Box 41014

City San Juan State PR Zip Code 00940

FEC ID number of contributing federal political committee. **C**

Name of Employer Fundacion Carbajal Occupation Executive Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **525.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.9017

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Alfredo Salazar Conde

Mailing Address PO Box 41014

City San Juan State PR Zip Code 00940

FEC ID number of contributing federal political committee. **C**

Name of Employer Fundacion Carbajal Occupation Executive Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2012

Transaction ID : SA11AI.8844

Amount of Each Receipt this Period
100.00

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: (check only one)	PAGE 122 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Carlos Salazar Geigel

Mailing Address Cond. Les Courts
1554 Lopez Landron St. Apt. 308

City San Juan State PR Zip Code 00911

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Architect

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.9032

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
Carlos Salazar Geigel

Mailing Address Cond. Les Courts
1554 Lopez Landron St. Apt. 308

City San Juan State PR Zip Code 00911

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Architect

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.9034

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Jorge Sanchez

Mailing Address 516 B Juan J. Jimenez St.

City San Juan State PR Zip Code 00918

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
778.72

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2012

Transaction ID : SA11AI.8275

Amount of Each Receipt this Period
778.72

In-kind - Fundraising Expenses-Meals

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

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

1578.72

**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 123 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Jorge L. Sanchez Colon		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 07 / 2012
Mailing Address Chalets de Santa Maria # 24		Transaction ID : SA11AI.8007
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer self employed	Occupation Physician	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) B. Omar Sanchez Pagan		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 28 / 2012
Mailing Address Cond La Coruna 2023 Carr 177, Apt. 2003		Transaction ID : SA11AI.8295
City Guaynabo	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Lawyer-CPA	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Maria L. Santaella Arguinzoni		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 12 / 2012
Mailing Address PO Box 366676		Transaction ID : SA11AI.9793
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 393.76
Name of Employer unemployed	Occupation Retired	In-kind - T-Shirts
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3028.41	

SUBTOTAL of Receipts This Page (optional).....	2393.76
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: (check only one)	PAGE 124 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Angel L. Santana

Mailing Address **PO Box 8582**

City **Humacao** State **PR** Zip Code **00792**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Retailer**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 11 / 2012

Transaction ID : SA11AI.8116

Amount of Each Receipt this Period
600.00

B. Full Name (Last, First, Middle Initial)
Isabelita Santana Rodriguez

Mailing Address **Urb. Reina de los Angeles
P-15 Calle 1**

City **Gurabo** State **PR** Zip Code **00694**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 22 / 2012

Transaction ID : SA11AI.7884

Amount of Each Receipt this Period
225.00

C. Full Name (Last, First, Middle Initial)
Monserrate Santiago Rodriguez

Mailing Address **Merida Street 1686 Venus Gardens**

City **San Juan** State **PR** Zip Code **00926**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Unemployed** Occupation **Retired**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 06 / 2012

Transaction ID : SA11AI.8037

Amount of Each Receipt this Period
100.00

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

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

925.00

**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)	PAGE 125 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Rafael Santos		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 11 / 2012
Mailing Address PO Box 215		Transaction ID : SA11AI.9740
City Humacao	State PR	Zip Code 00792
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 400.00	
Name of Employer Self-Employed	Occupation Attorney	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) B. Francisco Schettini Gracia		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 25 / 2012
Mailing Address Calle San Jorge Cond. Los Almendros Apt. #4		Transaction ID : SA11AI.8305
City San Juan	State PR	Zip Code 00911
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00	
Name of Employer ESI	Occupation Certified Public Accountant	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) C. Carmen A. Seda Agrait		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 25 / 2012
Mailing Address Dr. Basora St. # 22		Transaction ID : SA11AI.8048
City Mayaguez	State PR	Zip Code 00680
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Self-Employed	Occupation Medical Doctor	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

SUBTOTAL of Receipts This Page (optional).....	3400.00
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: (check only one)	PAGE 126 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Ramon Sepulveda Abreu

Mailing Address PO Box 8668

City Humacao State PR Zip Code 00792

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Medical Doctor-Urologist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2012

Transaction ID : SA11AI.7985

Amount of Each Receipt this Period
600.00

B. Full Name (Last, First, Middle Initial)
Ramon Sepulveda Abreu

Mailing Address PO Box 8668

City Humacao State PR Zip Code 00792

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Medical Doctor-Urologist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2012

Transaction ID : SA11AI.7988

Amount of Each Receipt this Period
800.00

C. Full Name (Last, First, Middle Initial)
Ramon Sepulveda Abreu

Mailing Address PO Box 8668

City Humacao State PR Zip Code 00792

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Medical Doctor-Urologist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 11 / 2012

Transaction ID : SA11AI.7977

Amount of Each Receipt this Period
600.00

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 127 OF 311
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Fabian Serrano Guzman

Mailing Address **C/K #16 Jardines de Arecibo**

City **Arecibo** State **PR** Zip Code **00612**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Departamento de Hacienda** Occupation **Public Servant**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 20 / 2012

Transaction ID : SA11AI.9045

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Pedro Soldevila

Mailing Address **La Garita D-18**
Paseo San Juan

City **San Juan** State **PR** Zip Code **00926**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Eliel Ortho Medical Corp.** Occupation **President**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 12 / 2012

Transaction ID : SA11AI.9833

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Juan Somoza Martinez

Mailing Address **Bo. Algarrobo**
Km 1 Hm 4 Carr. 104

City **Mayaguez** State **PR** Zip Code **00682**

FEC ID number of contributing federal political committee. **C**

Name of Employer **National Development Corp.** Occupation **President**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 06 / 2012

Transaction ID : SA11AI.8573

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: (check only one)	PAGE 128 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Jose Sosa Llorens

Mailing Address Box 363507

City San Juan State PR Zip Code 00936

FEC ID number of contributing federal political committee. **C**

Name of Employer Fiddler, Gonzalez & Rodriguez Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.9077

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Miguel Sosa Padilla

Mailing Address Urb. San Francisco
200 Violeta St.

City San Juan State PR Zip Code 00927

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2012

Transaction ID : SA11AI.8284

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Carlos Souffront

Mailing Address PO Box 195115

City San Juan State PR Zip Code 00919-5115

FEC ID number of contributing federal political committee. **C**

Name of Employer Oriental Group Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 26 / 2012

Transaction ID : SA11AI.8328

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: (check only one)	PAGE 129 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Roberto Suarez Sein		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 14 / 2012
Mailing Address Bolivia Street 33, 5th Floor		Transaction ID : SA11AI.7571
City San Juan	State PR	
Zip Code 00917		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Lawyer	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. Rafael Subero Collazo		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 05 / 2012
Mailing Address Palacio Imperial 1310 Francos St.		Transaction ID : SA11AI.8441
City Toa Alta	State PR	
Zip Code 00953		Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Department of Transportation	Occupation Director	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 240.00	

Full Name (Last, First, Middle Initial) C. Jose Toledo		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 20 / 2012
Mailing Address 20th St. Villa de San Agustin		Transaction ID : SA11AI.8426
City Bayamon	State PR	
Zip Code 00959		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Government of Puerto Rico	Occupation Public Servant	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1540.00
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: (check only one)	PAGE 130 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Jorge Toledo Colon

Mailing Address **PO Box 915**

City **Dorado** State **PR** Zip Code **00646**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Cerraduras Toledo** Occupation **Owner**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 18 / 2012

Transaction ID : SA11AI.8379

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Conchita Toro Rivera

Mailing Address **PO Box 4207**

City **Mayaguez** State **PR** Zip Code **00681**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Catholic University-Law School** Occupation **Attorney-Professor**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 22 / 2012

Transaction ID : SA11AI.8051

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Camille Toro Torruella

Mailing Address **PO Box 40653**

City **San Juan** State **PR** Zip Code **00940**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Strategies for Evolution Inc.** Occupation **Director**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 13 / 2012

Transaction ID : SA11AI.9022

Amount of Each Receipt this Period
250.00

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: (check only one)	PAGE 131 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Luis C. Torrellas Ruiz

Mailing Address Calle Dufresne 5

City Humacao State PR Zip Code 00791

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 02 / 2012

Transaction ID : SA11AI.8100

Amount of Each Receipt this Period
 400.00

B. Full Name (Last, First, Middle Initial)
Humberto Torres

Mailing Address Box 10046

City San Juan State PR Zip Code 00922

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 14 / 2012

Transaction ID : SA11AI.9056

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
German Torres Berrios

Mailing Address HC 04 Box 5775

City Barranquitas State PR Zip Code 00794

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2012

Transaction ID : SA11AI.9736

Amount of Each Receipt this Period
 500.00

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

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

1150.00

**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)	PAGE 132 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Victor Torres Maldonado

Mailing Address HC1 Box 3757
Bo. Quebrada Grande

City Barranquitas State PR Zip Code 00794

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Medical Support Services

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2012

Transaction ID : SA11AI.9728

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Carmen M Torres Melendez

Mailing Address Cond. Hato Rey Plaza
200 Jesus T. Pinero Ave Apt. 19K

City San Juan State PR Zip Code 00918-4151

FEC ID number of contributing federal political committee. **C**

Name of Employer Department of the Family Occupation Executive Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2012

Transaction ID : SA11AI.8524

Amount of Each Receipt this Period
175.00

In-kind - Fundraising Expenses-Meals

C. Full Name (Last, First, Middle Initial)
Francisco Torres Pagan

Mailing Address Urb. Vega Linda
Tomas Torres St #20

City Jayuya State PR Zip Code 00664

FEC ID number of contributing federal political committee. **C**

Name of Employer Jayuya Municipal Assembly Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
348.26

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2012

Transaction ID : SA11AI.9647

Amount of Each Receipt this Period
248.26

In-kind - Fundraising Expenses-Meals and Beverages

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

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

923.26

**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 133 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Ricardo Torres Rivera

Mailing Address P.O. Box 681

City Comerio State PR Zip Code 00782-0681

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 09 / 2012

Transaction ID : SA11AI.7650

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Carmelina Valentin Alicea

Mailing Address Urb. El Remanso
A-6 Arroyo St.

City San Juan State PR Zip Code 00926

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-employed Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **575.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 22 / 2012

Transaction ID : SA11AI.7849

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
Carmelina Valentin Alicea

Mailing Address Urb. El Remanso
A-6 Arroyo St.

City San Juan State PR Zip Code 00926

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-employed Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1075.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 22 / 2012

Transaction ID : SA11AI.7850

Amount of Each Receipt this Period
500.00

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

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

700.00

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.7650

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

Form/Schedule:

Transaction ID:

**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 135 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Maritza Vales Ufret		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 17 / 2012
Mailing Address Urb. Paseo Real Calle A # B-3		Transaction ID : SA11AI.8004
City San Juan	State PR	
Zip Code 00926	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer unemployed	Occupation Homemaker	Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date 1250.00		

Full Name (Last, First, Middle Initial) B. Jose M Varela Fernandez		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 16 / 2012
Mailing Address P.O. Box 373301		Transaction ID : SA11AI.8915
City Cayey	State PR	
Zip Code 00737	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00
Name of Employer self-employed	Occupation Attorney	Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date 350.00		

Full Name (Last, First, Middle Initial) C. Juan A. Vazquez		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 02 / 2012
Mailing Address Box 9090		Transaction ID : SA11AI.8112
City Caguas	State PR	
Zip Code 00726	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 400.00
Name of Employer Self-Employed	Occupation Certified Public Accountant	Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date 400.00		

SUBTOTAL of Receipts This Page (optional).....	1500.00
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 136 OF 311
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Gladys Vazquez De Nieves

Mailing Address Urb. Milaville Pina St. # 183

City San Juan State PR Zip Code 00926

FEC ID number of contributing federal political committee. **C**

Name of Employer unemployed Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1125.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 10 / 2012

Transaction ID : SA11AI.7711

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Angel Vazquez Hernandez

Mailing Address Urb. Sierra del Rio
BZ 82 300 La Sierra Ave.

City San Juan State PR Zip Code 00928

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Retailer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.9018

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Orlando Vazquez Rivera

Mailing Address Barrio Barrancas
Parcelas Vie Carr 771 km 5.6

City Barranquitas State PR Zip Code 00794

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retailer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2012

Transaction ID : SA11AI.9734

Amount of Each Receipt this Period
500.00

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

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

950.00

**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)	PAGE 137 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Juan J. Velazquez Villares

Mailing Address PO Box 734

City State Zip Code
Caguas PR 00725

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
525.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 11 / 2012

Transaction ID : SA11A1.9768

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
Enrique A Vera Sanchez

Mailing Address El Remanso
Arroyo St. A-11

City State Zip Code
San Juan PR 00926

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
self employed Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 16 / 2012

Transaction ID : SA11A1.8962

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Juan M. Vidal

Mailing Address Urb. Baldrich
211 Agustin Stahl St.

City State Zip Code
San Juan PR 00918

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 30 / 2012

Transaction ID : SA11A1.7618

Amount of Each Receipt this Period
125.00

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

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

625.00

**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)	PAGE 138 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)
Juan M. Vidal

Mailing Address Urb. Baldrich
211 Agustin Stahl St.

City San Juan State PR Zip Code 00918

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 16 / 2012

Transaction ID : SA11AI.8924

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Enrique Vila del Corral

Mailing Address PO Box 11363

City San Juan State PR Zip Code 00922-1363

FEC ID number of contributing federal political committee. **C**

Name of Employer Vila del Corral and Company Occupation Vice President - CPA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 24 / 2012

Transaction ID : SA11AI.8289

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Enrique Vila del Corral

Mailing Address PO Box 11363

City San Juan State PR Zip Code 00922-1363

FEC ID number of contributing federal political committee. **C**

Name of Employer Vila del Corral and Company Occupation Vice President - CPA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 27 / 2012

Transaction ID : SA11AI.8288

Amount of Each Receipt this Period
500.00

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: (check only one)	PAGE 139 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Jose A. Vilella Cassanova		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 16 / 2012	
Mailing Address 576 Ave. Cesar Gonzalez		Transaction ID : SA11AI.8925	
City San Juan	State PR	Zip Code 00918	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self-Employed	Occupation Retailer		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00		

Full Name (Last, First, Middle Initial) B. Pierre Vivoni		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 12 / 2012	
Mailing Address PO Box 1365		Transaction ID : SA11AI.8349	
City Caguas	State PR	Zip Code 00726	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Self-Employed	Occupation Attorney		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) C. Pedro Vivoni Alcaraz		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 11 / 2012	
Mailing Address Box 360393		Transaction ID : SA11AI.7961	
City San Juan	State PR	Zip Code 00936-0393	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Agroservicios, Inc.	Occupation Agronomist		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 140 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Martin Wah Reyes

Mailing Address PO Box 817

City: Barranquitas State: PR Zip Code: 00794

FEC ID number of contributing federal political committee: C

Name of Employer: AEE Occupation: Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 08 / 14 / 2012

Transaction ID : SA11AI.9706

Amount of Each Receipt this Period: 500.00

B. 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: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 07 / 24 / 2012

Transaction ID : SA11AI.8578

Amount of Each Receipt this Period: 400.00

C. Full Name (Last, First, Middle Initial)
Magdalena Zalduondo

Mailing Address Urb. Suchville
10 Principal St.

City: Guaynabo State: PR Zip Code: 00966

FEC ID number of contributing federal political committee: C

Name of Employer: Unemployed Occupation: Housewife

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 275.00

Date of Receipt: 08 / 10 / 2012

Transaction ID : SA11AI.8722

Amount of Each Receipt this Period: 200.00

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: PAGE 141 OF 311
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Carmen Zorrilla

Mailing Address 592 Cesar Gonzalez
Apt. 1312

City San Juan State PR Zip Code 00918

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Medical Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 02 / 2012

Transaction ID : SA11AI.7599

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Frank Zorrilla

Mailing Address P.O. Box 191783

City San Juan State PR Zip Code 00919-1783

FEC ID number of contributing federal political committee. **C**

Name of Employer Frank Zorrilla Law Office Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 12 / 2012

Transaction ID : SA11AI.8565

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Frank Zorrilla

Mailing Address P.O. Box 191783

City San Juan State PR Zip Code 00919-1783

FEC ID number of contributing federal political committee. **C**

Name of Employer Frank Zorrilla Law Office Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 02 / 2012

Transaction ID : SA11AI.7679

Amount of Each Receipt this Period
250.00

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

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

625.00

**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)	PAGE 142 OF 311
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Frank Zorrilla

Mailing Address P.O. Box 191783

City San Juan State PR Zip Code 00919-1783

FEC ID number of contributing federal political committee. **C**

Name of Employer Frank Zorrilla Law Office Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 13 / 2012

Transaction ID : SA11Al.9049

Amount of Each Receipt this Period
250.00

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).....

250.00

194066.41

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 143 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Carmen E. Acevedo Betancourt			Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2012	
Mailing Address Urb. Roosevelt Canals St. #451			Amount of Each Disbursement this Period 1302.00	
City San Juan	State PR	Zip Code 00918	Transaction ID : SB17.10947	
Purpose of Disbursement Salary		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Action Printing			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012	
Mailing Address Loiza St. # 1603			Amount of Each Disbursement this Period 85.60	
City Santurce	State PR	Zip Code 00911	Transaction ID : SB17.9393	
Purpose of Disbursement Office Supplies		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Action Printing			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012	
Mailing Address Loiza St. # 1603			Amount of Each Disbursement this Period 26.75	
City Santurce	State PR	Zip Code 00911	Transaction ID : SB17.9472	
Purpose of Disbursement Office Supplies		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1414.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 144 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Blanca Agrait Llado		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2012
Mailing Address Urb. Baldrich 202 Tous Soto St.		Amount of Each Disbursement this Period 263.22 Transaction ID : SB17.7583
City San Juan	State PR Zip Code 00918	
Purpose of Disbursement In-kind - Fundraising Expense-Meals and Beverages		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Blanca Agrait Llado		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2012
Mailing Address Urb. Baldrich 202 Tous Soto St.		Amount of Each Disbursement this Period 1400.00 Transaction ID : SB17.9668
City San Juan	State PR Zip Code 00918	
Purpose of Disbursement In-kind - Fundraising Expenses-Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Eugenio M. Alonso		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2012
Mailing Address Urb. Baldrich 202 Tous Soto St.		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.7579
City San Juan	State PR Zip Code 00918	
Purpose of Disbursement In-kind - Fundraising Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2663.22
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 145 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Eugenio M. Alonso		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2012
Mailing Address Urb. Baldrich 202 Tous Soto St.		Amount of Each Disbursement this Period 321.48 Transaction ID : SB17.9666
City San Juan	State PR Zip Code 00918	
Purpose of Disbursement In-kind - Fundraising Expenses-Beverages		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Eiton Arroyo Muniz		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2012
Mailing Address P.O. Box 505		Amount of Each Disbursement this Period 1017.90 Transaction ID : SB17.8750
City Anasco	State PR Zip Code 00610	
Purpose of Disbursement In-kind - Fundraising Expenses-Meals and Beverages		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Audio Visual Consultants Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address PO Box 5999		Amount of Each Disbursement this Period 3550.00 Transaction ID : SB17.10970
City Caguas	State PR Zip Code 00726	
Purpose of Disbursement TV, Audio and Lights rentals for the Popular Democratic Party Convention Events		Category/Type 007
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4889.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 146 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2012
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 3008.00 Transaction ID : SB17.9408
City San Juan	State PR Zip Code 00936-2708	
Purpose of Disbursement Deposit-VISA Travel Card and bank fee for the transaction		Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Benitez Aviation Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012
Mailing Address Cond. Galeria I Suite 305 201 Arterial Hostos, Hato Rey		Amount of Each Disbursement this Period 2990.00 Transaction ID : SB17.9383
City San Juan	State PR Zip Code 00918	
Purpose of Disbursement Transportation Services-Helicopter transportation services		Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Benitez Aviation Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address Cond. Galeria I Suite 305 201 Arterial Hostos, Hato Rey		Amount of Each Disbursement this Period 2080.00 Transaction ID : SB17.9629
City San Juan	State PR Zip Code 00918	
Purpose of Disbursement Transportation Services-Helicopter transportation services		Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8078.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 147 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Cafe Valencia		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 1000 Munoz Rivera Ave.		Amount of Each Disbursement this Period 325.28
City Rio Piedras	State PR	
Zip Code 00927	Purpose of Disbursement Meals	Transaction ID : SB17.9602
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Caguas Expressway Motors		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address P.O Box 50045		Amount of Each Disbursement this Period 4950.00
City San Juan	State PR	
Zip Code 00902	Purpose of Disbursement Campaing Vehicles Rental	Transaction ID : SB17.9451
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals expense for campaign activity	Transaction ID : SB17.9562
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5375.28
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9562

Meals expense for campaign activity, no disbursement of \$200 aggregated to the original vendor.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 149 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.9563
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gas expense for campaign vehicles	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.9564
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gas expense for campaign vehicles	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.9565
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Toll expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	220.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9563

Gas expense for campaign vehicles, no disbursement of \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9564

Gas expense for campaign vehicles, no disbursement of \$200 aggregated to the original vendor.

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

Form/Schedule: SB17

Transaction ID : SB17.9565

Meals expense for campaign activity, no disbursement of \$200 aggregated to the original vendor.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 152 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 118.82 Transaction ID : SB17.9336
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Reimbursement of meals and gas expenses for campaign activity	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.9339
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals expenses for campaign activity	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.9340
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals expenses for campaign activity on july 7	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	318.82
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9336

Reimbursement of meals and gas expenses for campaign activity, no disbursements of \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9339

Meals expenses for campaign activity, no disbursements of \$200 aggregated to the original vendor.

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

Form/Schedule: SB17

Transaction ID : SB17.9340

Meals expenses for campaign activity, no disbursements of \$200 aggregated to the original vendor.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 155 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 90.00
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gas expenses for campaign vehicles	Transaction ID : SB17.9341
Candidate Name	Category/ Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 80.00
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gas expenses for campaign vehicles	Transaction ID : SB17.9342
Candidate Name	Category/ Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 880.00
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals and gas expenses for campaign activities	Transaction ID : SB17.9360
Candidate Name	Category/ Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9341

Gas expenses for campaign vehicles, no disbursement of \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9342

Gas expenses for campaign vehicles, no disbursements of \$200 aggregated to the original vendor.

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

Form/Schedule: SB17

Transaction ID : SB17.9360

Meals and gas expenses for campaign activities from 11-12 july, no disbursement of \$200 aggregated to the original vendor.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 158 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 660.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.9364	
Purpose of Disbursement Meals expenses for campaign activities		Category/ Type 007		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 480.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.9366	
Purpose of Disbursement Gas expenses for campaign vehicles		Category/ Type 007		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 380.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.9380	
Purpose of Disbursement Meals and gas expenses for campaign activity		Category/ Type 007		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1520.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9364

Meals expenses for campaign activities from 13-15 july, no disbursement of \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9366

Gas expenses for campaign activities from 13-15 july, no disbursement of \$200 aggregated to the original vendor.

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

Form/Schedule: SB17

Transaction ID : SB17.9380

Meals and gas expenses for campaign activity on july 21, no disbursement of \$200 aggregated to the original vendor.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 380.00 Transaction ID : SB17.9381
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals and gas expenses for campaign activity	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 390.00 Transaction ID : SB17.9378
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals and gas expenses for campaign activity	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.9370
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals and gas expenses for campaign activity	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1270.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9381

Meals and gas expenses for campaign activity on July 22, no disbursement of \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9378

Meals and gas expenses for campaign activity on Aguadilla, Puerto Rico, no disbursement of \$200 aggregated to the original vendor.

: 97 `A-G79 @C5 B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`G7 <98I @`CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.9370

Advance of meals and gas expenses for the Field Operations Team. This team organized the campaign massive activities around the Island, like meetings with voters, house to house walkings, and others. Mr. Calderon was the director of this team. Over \$200 disbursement to original vendor: \$205.26. Wendy's 111 St. Km. 17 Bo. Guatemala San Sebastian, Puerto Rico 00685 for meals on Jul/28/2012. Others disbursements to original vendor under \$200 aggregated.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 164 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.9371
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals and gas expenses for campaign activity	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 280.00 Transaction ID : SB17.9367
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals and gas expenses for campaign activity	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 380.00 Transaction ID : SB17.9391
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals and gas expenses for campaign activity	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1160.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`#19A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.9371

Meals and gas expenses for campaign activity on July 29, no disbursement of \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9367

Advance of meals and gas expenses for the Field Operations Team. This team organized the campaign massive activities around the Island, like meetings with voters, house to house walkings, and others. Mr. Calderon was the director of this team. Over \$200 disbursement to original vendor: \$212.52 to Wendy's, 505 Roosevelt Ave. San Juan, Puerto Rico 00918, for meals on Jul/31/2012. Other disbursements under \$200 aggregated to the original vendor.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.9391

Meals and gas expenses for campaign activity on August 1, no disbursement of \$200 aggregated to the original vendor.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 167 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 430.00 Transaction ID : SB17.9399
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals and gas expenses for campaign activity	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 53.50 Transaction ID : SB17.9431
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Reimbursement of meals expenses for campaign activity	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 98.00 Transaction ID : SB17.9432
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Reimbursement for the purchase of campaign t-shirts	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	581.50
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9399

Meals and gas expenses for campaign activity on August 4, no disbursement of \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9431

Reimbursement of meals expenses for campaign activity, no disbursements of \$200 aggregated to the original vendor.

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

Form/Schedule: SB17

Transaction ID : SB17.9432

Reimbursement for the purchase of campaign t-shirts. Original vendor: Wave Ranch, HC 72 Box 3766 PMB 323 Naranjito, Puerto Rico 00719-9788, on 08/07/2012. Purpose: Purchase of campaign T-shirts (t-shirts with campaign logo for the use of the staff). Amount: \$98.00.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 170 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 380.00 Transaction ID : SB17.9429
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals and gas expenses for campaign activity on Las Piedras	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 1120.00 Transaction ID : SB17.9417
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Transportation-Gas for campaign vehicles expenses; Meals for campaign activities	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 64.09 Transaction ID : SB17.9443
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Reimbursement of meals expenses for campaign activity	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1564.09
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9429

Meals and gas expenses for campaign activity on Las Piedras, Puerto Rico, no disbursement of \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9417

Transportation-Gas for campaign vehicles expenses; meals for activities from 10-12 August. No disbursements over \$200 aggregated to the original vendor.

: 97 `A -G79 @C B9CI G`H9LH`F9 @ H98 `HC `5 `F9DCFH`G7 <98I @ `CF `H9A -N5 H-CB

Form/Schedule: SB17

Transaction ID : SB17.9443

Reimbursement of meals expenses for campaign activity on August 15, no disbursements of \$200 aggregated to the original vendor.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2012		
Mailing Address PO Box 315			Amount of Each Disbursement this Period 560.00		
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.9445		
Purpose of Disbursement Meals and gas expenses for campaign activity		Category/ Type 007			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2012		
Mailing Address PO Box 315			Amount of Each Disbursement this Period 390.00		
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.9440		
Purpose of Disbursement Meals and gas expenses for campaign activity		Category/ Type 007			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2012		
Mailing Address PO Box 315			Amount of Each Disbursement this Period 1100.00		
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.9437		
Purpose of Disbursement Meals and gas expenses for campaign activities		Category/ Type 007			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9445

Gas for campaign vehicles expenses and meals for campaign activity on August 18. No disbursements over \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9440

Gas for campaign vehicles expenses and meals for campaign activity on August 20. No disbursements over \$200 aggregated to the original vendor.

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

Form/Schedule: SB17

Transaction ID : SB17.9437

Gas for campaign vehicles and meals for campaign activities expenses from August 25-26. No disbursements over \$200 aggregated to the original vendor.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 176 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 870.00 Transaction ID : SB17.9435
City Loiza	State PR	
Purpose of Disbursement Transportation-Gas for campaign vehicles expenses; Meals expenses for campaign activities		Category/ Type 007
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 1410.00 Transaction ID : SB17.9453
City Loiza	State PR	
Purpose of Disbursement Meals and gas expenses for campaign activities		Category/ Type 007
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 470.00 Transaction ID : SB17.9398
City Loiza	State PR	
Purpose of Disbursement Meals and gas expenses for campaign activity		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	2750.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.9435

Gas for campaign vehicles and meals for campaign activities expenses from August 28-30. No disbursements over \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9453

Gas for campaign vehicles and meals for campaign activities. No disbursements over \$200 aggregated to the original vendor.

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

Form/Schedule: SB17

Transaction ID : SB17.9398

Gas for campaign vehicles and meals for campaign activities expenses. No disbursements over \$200 aggregated to the original vendor.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 179 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 1520.00 Transaction ID : SB17.9462
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Transportation-Gas for campaign vehicles expenses; Meals expenses for campaign activities	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 520.00 Transaction ID : SB17.9484
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Transportation-Gas for campaign vehicles expenses; Meals expenses for campaign activities	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 2380.00 Transaction ID : SB17.9480
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Transportation-Gas for campaign vehicles expenses; Meals for campaign activities	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4420.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9462

Gas for campaign vehicles and meals for campaign activities from September 8-9 expenses. No disbursements over \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9484

Gas for campaign vehicles and meals for campaign activities on September 12 expenses. No disbursements over \$200 aggregated to the original vendor.

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

Form/Schedule: SB17

Transaction ID : SB17.9480

Gas for campaign vehicles and meals for campaign activities from September 13-16 expenses. No disbursements over \$200 aggregated to the original vendor.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 182 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 590.00 Transaction ID : SB17.9468
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Transportation-Gas for campaign vehicles expenses; Meals expenses of campaign activity	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 730.00 Transaction ID : SB17.9469
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Transportation-Gas for campaign vehicles expenses; Meals expenses for campaign activity	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 1460.00 Transaction ID : SB17.9470
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Transportation-Gas for campaign vehicles expenses; Meals expenses for campaign activities	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2780.00
TOTAL This Period (last page this line number only)	

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

Form/Schedule: SB17

Transaction ID : SB17.9468

Gas for campaign vehicles and meals for campaign activities on September 19 expenses. No disbursements over \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9469

Gas for campaign vehicles and meals for campaign activities on September 21 expenses. No disbursements over \$200 aggregated to the original vendor.

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

Form/Schedule: SB17

Transaction ID : SB17.9470

Gas for campaign vehicles and meals for campaign activities on September 22-23 expenses. No disbursements over \$200 aggregated to the original vendor.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 185 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 930.00 Transaction ID : SB17.9492
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Transportation-Gas for campaign vehicles expenses; Meals expenses for campaign acts on 25-27 Sept	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 1460.00 Transaction ID : SB17.9496
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Transportation-Gas for campaign vehicles expenses; Meals expenses for campaign acts on Sept 29-30	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Iris Cancio Cruz		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2012
Mailing Address Urb. Punto Oro 4541 Golondrina St.		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.9588
City Ponce	State PR	
Zip Code 00728	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5390.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9492

Advance of meals and gas expenses for the Field Operations Team. This team organized the campaign massive activities around the Island, like meetings with voters, house to house walkings, and others. Mr. Calderon was the director of this team. Over \$200 disbursement to original vendor: \$244.84 Pizza Hut, Juana Diaz Shopping Center Carr. 149 Corner 584 St Juana Diaz, Puerto Rico, 00795 on 09/25/2012 for meals. Other disbursements to the original vendor under \$200 aggregated.

Form/Schedule: SB17

Transaction ID: SB17.9496

Advance of meals and gas expenses for the Field Operations Team. This team organized the campaign massive activities around the Island, like meetings with voters, house to house walkings, and others. Mr. Calderon was the director of this team. Over \$200 disbursement to original vendor:\$288.73 to Wendy's, Plaza Cidra Mall, Cidra Puerto Rico 00739 for meals. Other disbuirgements to original vendor under \$200 aggregated.

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 187 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Iris Cancio Cruz		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address Urb. Punto Oro 4541 Golondrina St.		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.9580
City Ponce State PR Zip Code 00728	Purpose of Disbursement Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Francisco Cebollero		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2012
Mailing Address P.O. Box 3146		Amount of Each Disbursement this Period 986.78 Transaction ID : SB17.9670
City Mayaguez State PR Zip Code 00681-3146	Purpose of Disbursement In-kind - Fundraising Expenses-Meals Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Center Tech Comm. Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2012
Mailing Address PO Box 1253		Amount of Each Disbursement this Period 1412.40 Transaction ID : SB17.9418
City Cidra State PR Zip Code 00739	Purpose of Disbursement Purchase of two-way radios for communication of the team on campaing events Candidate Name Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4899.18
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 188 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Center Tech Comm. Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address PO Box 1253		Amount of Each Disbursement this Period 470.80 Transaction ID : SB17.9485
City Cidra	State PR	
Zip Code 00739	Purpose of Disbursement Purchase of two-way radios for communication of the team on campaign events	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Central 12		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.9387
City Guaynabo	State PR	
Zip Code 00968	Purpose of Disbursement Advertising Expenses	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Central 12		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.9388
City Guaynabo	State PR	
Zip Code 00968	Purpose of Disbursement Advertising Expenses	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1220.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Central 12		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406		Amount of Each Disbursement this Period 2160.00
City Guaynabo State PR Zip Code 00968	Purpose of Disbursement Advertising Expenses-Website Services Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.9389
State: District:		

Full Name (Last, First, Middle Initial) B. Central 12		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2012
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406		Amount of Each Disbursement this Period 300.00
City Guaynabo State PR Zip Code 00968	Purpose of Disbursement Advertising-Facebook Ads Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.9420
State: District:		

Full Name (Last, First, Middle Initial) C. Central 12		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2012
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406		Amount of Each Disbursement this Period 1500.00
City Guaynabo State PR Zip Code 00968	Purpose of Disbursement Advertising Consulting Services Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.9428
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3960.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 190 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Central 12		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2012
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.9439
City Guaynabo State PR Zip Code 00968	Purpose of Disbursement Advertising-Radio Spots 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Central 12		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.9464
City Guaynabo State PR Zip Code 00968	Purpose of Disbursement Foamboards 007 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Central 12		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406		Amount of Each Disbursement this Period 20025.00 Transaction ID : SB17.9463
City Guaynabo State PR Zip Code 00968	Purpose of Disbursement Advertising-TV and Radio Spots 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	21075.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 191 OF 311			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Central 12		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2012
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406		Amount of Each Disbursement this Period 1100.00 Transaction ID : SB17.9494
City Guaynabo	State PR Zip Code 00968	
Purpose of Disbursement Advertising-Facebook Ads	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Chez Daniel French Rest.		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2012
Mailing Address Anchors Villaga Marina Palmas del Mar Resort		Amount of Each Disbursement this Period 3082.94 Transaction ID : SB17.8359
City Humacao	State PR Zip Code 00791	
Purpose of Disbursement Fundraising Expenses-Meals	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Chez Daniel French Restautant		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2012
Mailing Address Anchors Villaga Marina Palmas del Mar Resort		Amount of Each Disbursement this Period 3082.94 Transaction ID : SB17.9414
City Humacao	State PR Zip Code 00791	
Purpose of Disbursement Fundraising Expense-Meals	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7265.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Iris Christianson		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012
Mailing Address Urb. Bucare #11 Diamante St.		Amount of Each Disbursement this Period 209.55 Transaction ID : SB17.9663
City Guaynabo	State PR Zip Code 00969	
Purpose of Disbursement In-kind - Fundraising Expenses-Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Claro PRT		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address PO Box 70366		Amount of Each Disbursement this Period 432.94 Transaction ID : SB17.9356
City San Juan	State PR Zip Code 00936-8366	
Purpose of Disbursement Communication Services		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Claro PRT		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2012
Mailing Address PO Box 70366		Amount of Each Disbursement this Period 416.97 Transaction ID : SB17.9433
City San Juan	State PR Zip Code 00936-8366	
Purpose of Disbursement Communications Services		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1059.46
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Colegio de Agronomos de PR			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2012		
Mailing Address PO Box 360005			Amount of Each Disbursement this Period 1284.00		
City San Juan	State PR	Zip Code 00936	Transaction ID : SB17.9634		
Purpose of Disbursement Fundraising Expenses-Rental		Category/ Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Colonial Insurance Agency			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2012		
Mailing Address 1101 Munoz Rivera Ave.			Amount of Each Disbursement this Period 1566.00		
City Rio Piedras	State PR	Zip Code 00925	Transaction ID : SB17.9609		
Purpose of Disbursement Campaign Vehicles Insurance		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Compania de Teatros Coribantes, Inc.			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012		
Mailing Address Box 22998			Amount of Each Disbursement this Period 2500.00		
City San Juan	State PR	Zip Code 00931	Transaction ID : SB17.10966		
Purpose of Disbursement Artistic Services on the Popular Democratic Party Convention		Category/ Type 007			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	5350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Compania de Teatros Coribantes, Inc.			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012	
Mailing Address Box 22998			Amount of Each Disbursement this Period 2100.00	
City San Juan	State PR	Zip Code 00931	Transaction ID : SB17.10968	
Purpose of Disbursement Artistic Services on the Popular Democratic Party Convention		Category/ Type 007		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Compu-Signs			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012	
Mailing Address 2679 Boulevard Ave.			Amount of Each Disbursement this Period 1000.00	
City Levittown	State PR	Zip Code 00949	Transaction ID : SB17.9612	
Purpose of Disbursement Car Labeling		Category/ Type 007		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Compu-Signs			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2012	
Mailing Address 2679 Boulevard Ave.			Amount of Each Disbursement this Period 1391.00	
City Levittown	State PR	Zip Code 00949	Transaction ID : SB17.9584	
Purpose of Disbursement Car Labeling		Category/ Type 007		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	4491.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 195 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. Compu-Signs		M M / D D / Y Y Y Y 08 / 06 / 2012	
Mailing Address 2679 Boulevard Ave.		Amount of Each Disbursement this Period	
City Levittown State PR Zip Code 00949 Purpose of Disbursement Car Labeling Candidate Name		1712.00 Transaction ID : SB17.9606	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/Type 007	
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. Compu-Signs		M M / D D / Y Y Y Y 08 / 07 / 2012	
Mailing Address 2679 Boulevard Ave.		Amount of Each Disbursement this Period	
City Levittown State PR Zip Code 00949 Purpose of Disbursement Car Labeling Candidate Name		70.00 Transaction ID : SB17.9599	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/Type 006	
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. Compu-Signs		M M / D D / Y Y Y Y 08 / 07 / 2012	
Mailing Address 2679 Boulevard Ave.		Amount of Each Disbursement this Period	
City Levittown State PR Zip Code 00949 Purpose of Disbursement Car Labeling Candidate Name		1070.00 Transaction ID : SB17.9600	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/Type 007	
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	2852.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 196 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Compu-Signs		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2012
Mailing Address 2679 Boulevard Ave.		Amount of Each Disbursement this Period 1872.50 Transaction ID : SB17.9624
City Levittown	State PR	
Zip Code 00949	Purpose of Disbursement Car Labeling	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Compu-Signs		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2012
Mailing Address 2679 Boulevard Ave.		Amount of Each Disbursement this Period 1872.50 Transaction ID : SB17.9626
City Levittown	State PR	
Zip Code 00949	Purpose of Disbursement Car Labeling	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Jose Cruz		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address PO Box 443		Amount of Each Disbursement this Period 1860.00 Transaction ID : SB17.10964
City Juncos	State PR	
Zip Code 00777	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5605.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 197 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Jose Cruz		Date of Disbursement MM / DD / YYYY 08 / 03 / 2012
Mailing Address PO Box 443		Amount of Each Disbursement this Period 1860.00 Transaction ID : SB17.9403
City Juncos	State PR	
Zip Code 00777	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Jose Cruz		Date of Disbursement MM / DD / YYYY 08 / 28 / 2012
Mailing Address PO Box 443		Amount of Each Disbursement this Period 700.00 Transaction ID : SB17.9787
City Juncos	State PR	
Zip Code 00777	Purpose of Disbursement Transportation and meals expenses-DNC Expenses	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Jose Cruz		Date of Disbursement MM / DD / YYYY 08 / 31 / 2012
Mailing Address PO Box 443		Amount of Each Disbursement this Period 1860.00 Transaction ID : SB17.9479
City Juncos	State PR	
Zip Code 00777	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	4420.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9787

Advance for expenses of food and transportation on Democrat National Convention. Mr. Cruz was assisting Mr. Cox Alomar on meetings, advising on political and media issues. Mr. Cox was delegate. The advance was determined by multiplying the days of stay working at the DNC by an estimated of expenses of \$100. The staffer had to document all transactions. No disbursements over \$200 aggregated to the original vendor.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 199 OF 311			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Ivelisse De Jesus			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2012	
Mailing Address PO Box 367921			Amount of Each Disbursement this Period 500.00	
City San Juan	State PR	Zip Code 00936-7921	Transaction ID : SB17.9444	
Purpose of Disbursement Gas and meals expenses		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. Ivelisse De Jesus			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2012	
Mailing Address PO Box 367921			Amount of Each Disbursement this Period 500.00	
City San Juan	State PR	Zip Code 00936-7921	Transaction ID : SB17.9455	
Purpose of Disbursement Gas and meals expenses		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. Ivelisse De Jesus			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012	
Mailing Address PO Box 367921			Amount of Each Disbursement this Period 500.00	
City San Juan	State PR	Zip Code 00936-7921	Transaction ID : SB17.9477	
Purpose of Disbursement Gas and meals expenses		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9444

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

Form/Schedule: SB17

Transaction ID: SB17.9455

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

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

Form/Schedule: SB17

Transaction ID : SB17.9477

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

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 202 OF 311		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. El Deportivo Rental		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2012
Mailing Address HC 43 Box 11297		Amount of Each Disbursement this Period 550.90
City Cayey	State PR	
Zip Code 00736	Purpose of Disbursement Fundraising Expenses-Rental	Transaction ID : SB17.9613
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Epiko Magazine Advertising		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 215 Lake Biscayne Way		Amount of Each Disbursement this Period 600.00
City Orlando	State FL	
Zip Code 32824	Purpose of Disbursement Advertising-Newspaper/Magazine	Transaction ID : SB17.9604
Candidate Name	004 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Toti Figueroa		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address Apartado 3744 Marina Station		Amount of Each Disbursement this Period 312.00
City Mayaguez	State PR	
Zip Code 00681	Purpose of Disbursement Advertising	Transaction ID : SB17.9589
Candidate Name	004 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1462.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 203 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Toti Figueroa		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2012
Mailing Address Apartado 3744 Marina Station		Amount of Each Disbursement this Period 312.00 Transaction ID : SB17.9582
City Mayaguez	State PR	
Zip Code 00681	Purpose of Disbursement Advertising	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Nereida Figueroa Maldonado		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012
Mailing Address Plaza del Parque Apt. 243		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.8527
City Trujillo Alto	State PR	
Zip Code 00976	Purpose of Disbursement In-kind - Fundraising Expenses-Music	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Manuel Franco		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2012
Mailing Address Apartado 405		Amount of Each Disbursement this Period 255.59 Transaction ID : SB17.8156
City Santa Isabel	State PR	
Zip Code 00757	Purpose of Disbursement In-kind - Fundraising Expenses-Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	967.59
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 204 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Carl Gibbs Acosta		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address Cape Village B-4 Buzon 110		Amount of Each Disbursement this Period 1860.00 Transaction ID : SB17.10951
City Carolina	State PR	
Zip Code 00979	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Carl Gibbs Acosta		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address Cape Village B-4 Buzon 110		Amount of Each Disbursement this Period 1860.00 Transaction ID : SB17.9607
City Carolina	State PR	
Zip Code 00979	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Carl Gibbs Acosta		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012
Mailing Address Cape Village B-4 Buzon 110		Amount of Each Disbursement this Period 1860.00 Transaction ID : SB17.9449
City Carolina	State PR	
Zip Code 00979	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	5580.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 205 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Maritza Gonzalez Seijo			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012	
Mailing Address Urb. Bucare 13 Diamante St.			Amount of Each Disbursement this Period 350.91	
City Guaynabo	State PR	Zip Code 00969	Transaction ID : SB17.9664	
Purpose of Disbursement In-kind - Fundraising Expenses-Music-Rentals		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Richard Guzman Rivera			Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2012	
Mailing Address 112 Paris St. Urb. Floral Park			Amount of Each Disbursement this Period 300.00	
City Hato Rey	State PR	Zip Code 00917	Transaction ID : SB17.9572	
Purpose of Disbursement Car Rental		Category/ Type 007		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Richard Guzman Rivera			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012	
Mailing Address 112 Paris St. Urb. Floral Park			Amount of Each Disbursement this Period 600.00	
City Hato Rey	State PR	Zip Code 00917	Transaction ID : SB17.9571	
Purpose of Disbursement Car Rental		Category/ Type 007		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1250.91
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5H-CB

Form/Schedule: SB17

Transaction ID : SB17.9572

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

Form/Schedule: SB17

Transaction ID: SB17.9571

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 207 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Richard Guzman Rivera		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2012
Mailing Address 112 Paris St. Urb. Floral Park		Amount of Each Disbursement this Period 900.00 Transaction ID : SB17.9570
City Hato Rey State PR Zip Code 00917	Purpose of Disbursement Car Rental Candidate Name Category/Type 007	
Office Sought: House Senate President Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Richard Guzman Rivera		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012
Mailing Address 112 Paris St. Urb. Floral Park		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.9569
City Hato Rey State PR Zip Code 00917	Purpose of Disbursement Car Rental Candidate Name Category/Type 007	
Office Sought: House Senate President Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Richard Guzman Rivera		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2012
Mailing Address 112 Paris St. Urb. Floral Park		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.9568
City Hato Rey State PR Zip Code 00917	Purpose of Disbursement Car Rental Candidate Name Category/Type 007	
Office Sought: House Senate President Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1800.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: **SB17**

Transaction ID : **SB17.9570**

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

Form/Schedule: **SB17**

Transaction ID: **SB17.9569**

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.9568

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

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 210 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Richard Guzman Rivera		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address 112 Paris St. Urb. Floral Park		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.9576
City Hato Rey State PR Zip Code 00917	Purpose of Disbursement Car Rental Candidate Name Category/Type 007	
Office Sought: House Senate President Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Richard Guzman Rivera		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2012
Mailing Address 112 Paris St. Urb. Floral Park		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.9574
City Hato Rey State PR Zip Code 00917	Purpose of Disbursement Car Rental Candidate Name Category/Type 007	
Office Sought: House Senate President Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Richard Guzman Rivera		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address 112 Paris St. Urb. Floral Park		Amount of Each Disbursement this Period 2100.00 Transaction ID : SB17.9566
City Hato Rey State PR Zip Code 00917	Purpose of Disbursement Car Rental Candidate Name Category/Type 007	
Office Sought: House Senate President Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3900.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: **SB17**

Transaction ID : **SB17.9576**

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

Form/Schedule: **SB17**

Transaction ID: **SB17.9574**

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

: 97 `A -G7 9 @ @ B9 CI G`H9 LH`F9 @ H98 `HC `5 `F9 DCFH`G7 <98 I @ `CF `H9 A -N5 H-CB

Form/Schedule: SB17

Transaction ID : SB17.9566

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

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 213 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Miguel Hernandez Agosto		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address Apartado 367746		Amount of Each Disbursement this Period 4650.00 Transaction ID : SB17.10972
City San Juan State PR Zip Code 00936-7746	Purpose of Disbursement Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Miguel Hernandez Agosto		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2012
Mailing Address Apartado 367746		Amount of Each Disbursement this Period 4755.00 Transaction ID : SB17.9430
City San Juan State PR Zip Code 00936-7746	Purpose of Disbursement Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Miguel Hernandez Agosto		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address Apartado 367746		Amount of Each Disbursement this Period 4650.00 Transaction ID : SB17.9483
City San Juan State PR Zip Code 00936-7746	Purpose of Disbursement Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	14055.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 214 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Boris Jaskille		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2012
Mailing Address 225 Tulip St. Urb. Court Yard #9		Amount of Each Disbursement this Period 321.93 Transaction ID : SB17.8390
City San Juan	State PR Zip Code 00926	
Purpose of Disbursement In-kind - Fundraising Expenses-Meals	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Gabriel Laborde		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2012
Mailing Address Urb. Rio Piedras Heights Tinto Street 1679		Amount of Each Disbursement this Period 374.00 Transaction ID : SB17.9459
City San Juan	State PR Zip Code 00926	
Purpose of Disbursement Reimbursement-Transportation expenses	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Gabriel Laborde		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2012
Mailing Address Urb. Rio Piedras Heights Tinto Street 1679		Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.9415
City San Juan	State PR Zip Code 00926	
Purpose of Disbursement Reimbursement-Meals	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	715.93
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9459

Reimbursement of expenses made for food and transportation on Democrat National Convention. Mr. Laborde was assisting Mr. Cox Alomar on meetings and advising on political issues. Mr. Cox was delegate. Payment to original vendor: Enterprise, 424 Air Ramp Road, Charlotte, NC 28214. Made on sept-1-2012. Total of original disbursement: \$374.00. Purpose: Transportation for the staff and candidate, car rental.

Form/Schedule: SB17

Transaction ID: SB17.9415

Disbursements under \$200 aggregated to the original vendor.

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 216 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Gabriel Laborde		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2012
Mailing Address Urb. Rio Piedras Heights Tinto Street 1679		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.9785
City San Juan	State PR Zip Code 00926	
Purpose of Disbursement Transportation and meals expenses	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Javier J Lamboy Hernandez		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		Amount of Each Disbursement this Period 320.00 Transaction ID : SB17.9335
City San Juan	State PR Zip Code 00917	
Purpose of Disbursement Meals and gas expenses for campaign activity on July 3	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Javier J Lamboy Hernandez		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		Amount of Each Disbursement this Period 2325.00 Transaction ID : SB17.10955
City San Juan	State PR Zip Code 00917	
Purpose of Disbursement Salary	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3145.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9785

Advance for expenses of food and transportation on Democrat National Convention. Mr. Laborde was assisting Mr. Cox Alomar on meetings, advising on political issues. Mr. Cox was delegate. The advance was determined by multiplying the days of stay working at the DNC by an estimated of expenses of \$100. The staffer had to document all transactions. No disbursements over \$200 aggregated to one original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9335

Meals for Field Operations Team on campaign activity and gas for campaign vehicles expenses. Disbursements under \$200 aggregated to the original vendor.

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 218 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Javier J Lamboy Hernandez		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2012
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.9357
City San Juan State PR Zip Code 00917	Purpose of Disbursement Petty Cash Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Javier J Lamboy Hernandez		Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2012
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		Amount of Each Disbursement this Period 497.74 Transaction ID : SB17.9375
City San Juan State PR Zip Code 00917	Purpose of Disbursement Meals and gas expenses Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Javier J Lamboy Hernandez		Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2012
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		Amount of Each Disbursement this Period 40.00 Transaction ID : SB17.9543
City San Juan State PR Zip Code 00917	Purpose of Disbursement Mailing Expense Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	837.74
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C5 B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.9357

Petty cash for office materials, water, bags, paper and pens. Disbursements under \$100 on cash and under \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9375

Reimbursement of meal and gas expenses made by Mr. Lamboy on campaign duties such as, attending to meetings and fundraising activities. Disbursements over \$200 aggregated: Original vendor: Shell Baldrich, Coll y Toste St. Hato Rey, Puerto Rico 00918 Amount: \$27.99 made on 03/11/2012, \$20.99 on 03/27/2012, 23.36 on 04/02/2012 and \$22.25 on 04/24/2012. Purpose: Gas and meals expenses. Other disbursements under \$200 aggregated to the original vendor.

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

Form/Schedule: SB17

Transaction ID : SB17.9543

Disbursements under \$200 aggregated to the original vendor.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 221 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Javier J Lamboy Hernandez		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2012
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		Amount of Each Disbursement this Period 2325.00 Transaction ID : SB17.9392
City San Juan State PR Zip Code 00917	Purpose of Disbursement Salary Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Javier J Lamboy Hernandez		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2012
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		Amount of Each Disbursement this Period 604.67 Transaction ID : SB17.9405
City San Juan State PR Zip Code 00917	Purpose of Disbursement Meals and gas expenses Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Javier J Lamboy Hernandez		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2012
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.9545
City San Juan State PR Zip Code 00917	Purpose of Disbursement Meals Expenses Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2979.67
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9405

Reimbursement of meal and gas expenses made by Mr. Lamboy on campaign duties such as, attending to meetings and fundraising activities. Disbursements over \$200 aggregated: Original vendor: Shell Baldrich, Coll y Toste St. Hato Rey, Puerto Rico 00918 Amount: \$25.50 made on 06/12/2012 and \$15.39 on 08/05/2012. Purpose: Gas and meals expenses. Other disbursements under \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9545

Meals expenses on campaign meeting. Disbursements under \$200 aggregated to the original vendor.

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 223 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Javier J Lamboy Hernandez			Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2012	
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2			Amount of Each Disbursement this Period 40.00	
City San Juan	State PR	Zip Code 00917	Transaction ID : SB17.9552	
Purpose of Disbursement Gas Expense		002	Category/ Type	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. Javier J Lamboy Hernandez			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2012	
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2			Amount of Each Disbursement this Period 60.00	
City San Juan	State PR	Zip Code 00917	Transaction ID : SB17.9551	
Purpose of Disbursement Gas Expense		002	Category/ Type	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. Javier J Lamboy Hernandez			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2012	
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2			Amount of Each Disbursement this Period 20.00	
City San Juan	State PR	Zip Code 00917	Transaction ID : SB17.9550	
Purpose of Disbursement Gas Expense		002	Category/ Type	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9552

Gas expenses on campaign activity. Disbursements under \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9551

Gas expenses on campaign activity. Disbursements under \$200 aggregated to the original vendor.

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

Form/Schedule: SB17

Transaction ID : SB17.9550

Gas expenses on campaign activity. Disbursements under \$200 aggregated to the original vendor.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 226 OF 311			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Javier J Lamboy Hernandez			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012	
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2			Amount of Each Disbursement this Period 2325.00	
City San Juan	State PR	Zip Code 00917	Transaction ID : SB17.9448	
Purpose of Disbursement Salary		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Javier J Lamboy Hernandez			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012	
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2			Amount of Each Disbursement this Period 60.00	
City San Juan	State PR	Zip Code 00917	Transaction ID : SB17.9542	
Purpose of Disbursement Meals expenses		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Javier J Lamboy Hernandez			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012	
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2			Amount of Each Disbursement this Period 478.40	
City San Juan	State PR	Zip Code 00917	Transaction ID : SB17.9482	
Purpose of Disbursement Meals and gas expenses		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2863.40
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9542

Meals expenses made on campaign meeting. Disbursements under \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9482

Reimbursement of meal and gas expenses made by Mr. Lamboy on campaign duties such as, attending to meetings and fundraising activities. Disbursements over \$200 aggregated: Original vendor: Shell Baldrich, Coll y Toste St. Hato Rey, Puerto Rico 00918 Amount: \$23.00 Made on 08/16/2012 and \$27.41 on 08/24/2012. Purpose: Gas and meals expenses. Other disbursements under \$200 aggregated to the original vendor

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 228 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Javier J Lamboy Hernandez			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012	
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2			Amount of Each Disbursement this Period 96.30	
City San Juan	State PR	Zip Code 00917	Transaction ID : SB17.9554	
Purpose of Disbursement Office Materials-WiFi		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Javier J Lamboy Hernandez			Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012	
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2			Amount of Each Disbursement this Period 11.00	
City San Juan	State PR	Zip Code 00917	Transaction ID : SB17.9555	
Purpose of Disbursement Office Materials		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. LMV Specialties			Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2012	
Mailing Address PO Box 13868			Amount of Each Disbursement this Period 6540.00	
City San Juan	State PR	Zip Code 00908	Transaction ID : SB17.9374	
Purpose of Disbursement Promotional Items-Advertising-Shirts, pens and cups		Category/ Type 006		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	6647.30
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9554

Original vendor: Best Buy-Hato Rey, 230 Federico Costa St. Hato Rey, San Juan, Puerto Rico 00918. Amount: \$96.30 on 09/14/2012. Purpose: wi-fi cards for campaign computers.

Form/Schedule: SB17

Transaction ID: SB17.9555

Office water supplies. Disbursements under \$200 aggregated to the original vendor.

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 230 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. LMV Specialties		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address PO Box 13868		Amount of Each Disbursement this Period 580.00
City San Juan	State PR	
Zip Code 00908	Purpose of Disbursement Promotional Items-T-Shirts	Transaction ID : SB17.9601
Candidate Name	Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. LMV Specialties		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2012
Mailing Address PO Box 13868		Amount of Each Disbursement this Period 1251.85
City San Juan	State PR	
Zip Code 00908	Purpose of Disbursement Promotional Items-Cups	Transaction ID : SB17.9592
Candidate Name	Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Lydias Restaurant		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2012
Mailing Address Urb. Ls Caobos		Amount of Each Disbursement this Period 1643.25
City Ponce	State PR	
Zip Code 00717	Purpose of Disbursement Fundraising expenses-Meals	Transaction ID : SB17.10943
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3475.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 231 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Carlos Malaret		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address X-16 Pino St. Urb. Santa Clara		Amount of Each Disbursement this Period 325.00 Transaction ID : SB17.7584
City Guaynabo	State PR Zip Code 00969	
Purpose of Disbursement Fundraising expense-Music	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Lilliam Maldonado		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2012
Mailing Address PO Box 8086 Urb. Las Veredas		Amount of Each Disbursement this Period 1918.70 Transaction ID : SB17.9638
City Caguas	State PR Zip Code 00726	
Purpose of Disbursement In-kind - Fundraising Expenses-Meals	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Carlos Martinez Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2012
Mailing Address Urb. San Antonio Daniela St. 2328		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.9675
City Ponce	State PR Zip Code 00728	
Purpose of Disbursement In-kind - Fundraising Expenses-Meals and Music	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3243.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 232 OF 311		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Ada Miranda Velazquez		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012
Mailing Address 243 Paris St. PMB 1277		Amount of Each Disbursement this Period 503.75 Transaction ID : SB17.9645
City San Juan State PR Zip Code 00917	Purpose of Disbursement In-kind - Fundraising Expenses-Meals	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ada Miranda Velazquez		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012
Mailing Address 243 Paris St. PMB 1277		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.9646
City San Juan State PR Zip Code 00917	Purpose of Disbursement In-kind - Fundraising Expenses-Rent	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Israel Morales Alicea		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address Terranova 4B9 St.		Amount of Each Disbursement this Period 1965.00 Transaction ID : SB17.9587
City Guaynabo State PR Zip Code 00969	Purpose of Disbursement Salary	
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2968.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 233 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Israel Morales Alicea		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address Terranova 4B9 St.		Amount of Each Disbursement this Period 1860.00 Transaction ID : SB17.9577
City Guaynabo	State PR Zip Code 00969	
Purpose of Disbursement Salary	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Israel Morales Alicea		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address Terranova 4B9 St.		Amount of Each Disbursement this Period 1860.00 Transaction ID : SB17.9579
City Guaynabo	State PR Zip Code 00969	
Purpose of Disbursement Salary	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Ernesto Morales Ramos		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012
Mailing Address 2 Cond. San Francisco VLG Apt. 109		Amount of Each Disbursement this Period 2557.00 Transaction ID : SB17.10959
City Carolina	State PR Zip Code 00987-6950	
Purpose of Disbursement Salary	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6277.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 234 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Ernesto Morales Ramos			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012	
Mailing Address 2 Cond. San Francisco VLG Apt. 109			Amount of Each Disbursement this Period,.....,.....,.....,.....,.....,.....,.....,.....,..... 185.10	
City Carolina	State PR	Zip Code 00987-6950	Transaction ID : SB17.9390	
Purpose of Disbursement Backup Videos		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Ernesto Morales Ramos			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012	
Mailing Address 2 Cond. San Francisco VLG Apt. 109			Amount of Each Disbursement this Period,.....,.....,.....,.....,.....,.....,.....,.....,..... 1557.50	
City Carolina	State PR	Zip Code 00987-6950	Transaction ID : SB17.10961	
Purpose of Disbursement Salary		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Ernesto Morales Ramos			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2012	
Mailing Address 2 Cond. San Francisco VLG Apt. 109			Amount of Each Disbursement this Period,.....,.....,.....,.....,.....,.....,.....,.....,..... 2554.00	
City Carolina	State PR	Zip Code 00987-6950	Transaction ID : SB17.9446	
Purpose of Disbursement Salary		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....,.....,.....,.....,.....,.....,.....,.....,.....,..... 4296.60
TOTAL This Period (last page this line number only).....,.....,.....,.....,.....,.....,.....,.....,.....,.....

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

Form/Schedule: SB17

Transaction ID : SB17.9390

Disbursement of \$185.10 for back-up videos. No disbursement of \$200 aggregated to the original vendor.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 236 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Ernesto Morales Ramos		Date of Disbursement MM / DD / YYYY 08 / 28 / 2012
Mailing Address 2 Cond. San Francisco VLG Apt. 109		Amount of Each Disbursement this Period 1578.46 Transaction ID : SB17.9452
City Carolina	State PR	
Zip Code 00987-6950	Purpose of Disbursement Salary and reimbursement of meals and gas expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Ernesto Morales Ramos		Date of Disbursement MM / DD / YYYY 08 / 28 / 2012
Mailing Address 2 Cond. San Francisco VLG Apt. 109		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.9784
City Carolina	State PR	
Zip Code 00987-6950	Purpose of Disbursement Transportation and meals expenses	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Ernesto Morales Ramos		Date of Disbursement MM / DD / YYYY 09 / 13 / 2012
Mailing Address 2 Cond. San Francisco VLG Apt. 109		Amount of Each Disbursement this Period 2557.50 Transaction ID : SB17.9474
City Carolina	State PR	
Zip Code 00987-6950	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4635.96
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9452

Advance of salary by \$1,416.95 for the november 1-nov 15 period and reimbursement of meals and gas expenses by \$161.51. No disbursements over \$200 Aggregated to original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9784

Advance for expenses of food and transportation on Democrat National Convention. Mr. Morales was assisting Mr. Cox Alomar on meetings, advising on political issues and was involved on efforts to raise contributions. Mr. Cox was delegate. The advance was determined by multiplying the days of stay working at the DNC by an estimated of expenses of \$100. No disbursements over \$200 aggregated to the original vendor.

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 238 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Jose Morales Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address Car. 156, Km. 43.2 Sector La Madriguera		Amount of Each Disbursement this Period 695.00 Transaction ID : SB17.9650
City Aguas Buenas	State PR	
Zip Code 00703	Purpose of Disbursement Fundraising Expenses-Meals and Beverages	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Andres Muniz Colon		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address 232 Rey Fernando La Villa de Torrimar		Amount of Each Disbursement this Period 816.61 Transaction ID : SB17.9633
City Guaynabo	State PR	
Zip Code 00969	Purpose of Disbursement In-kind - Fundraising Expenses-Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Gilda Nadal		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2012
Mailing Address PO Box 360964		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.8428
City San Juan	State PR	
Zip Code 00936	Purpose of Disbursement In-kind - Fundraising expenses-Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1811.61
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 239 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Pedro Nicot Santana		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2012
Mailing Address PO Box 360486		Amount of Each Disbursement this Period 359.00
City San Juan	State PR	
Zip Code 00936-0486	Purpose of Disbursement In-kind - Fundraising Expenses-Meals	Transaction ID : SB17.8611
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. One Link Communications		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address PO Box 192296		Amount of Each Disbursement this Period 628.11
City San Juan	State PR	
Zip Code 00919-2296	Purpose of Disbursement Cable-TV and Internet Services	Transaction ID : SB17.10942
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. One Link Communications		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address PO Box 192296		Amount of Each Disbursement this Period 253.20
City San Juan	State PR	
Zip Code 00919-2296	Purpose of Disbursement Cable TV and Internet Services	Transaction ID : SB17.9402
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1240.31
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 240 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. One Link Communications		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2012
Mailing Address PO Box 192296		Amount of Each Disbursement this Period 659.94 Transaction ID : SB17.9471
City San Juan	State PR	
Zip Code 00919-2296	Purpose of Disbursement Internet and Cable TV Services	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Maria E Ortiz		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address Cond. Floral Park 7-C #20 Betances St.		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.9652
City San Juan	State PR	
Zip Code 00917	Purpose of Disbursement Meals and gas expenses	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Ivonne Otero Santiago		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2012
Mailing Address Calle 2 #77 Urb. Paseo Alto		Amount of Each Disbursement this Period 2045.00 Transaction ID : SB17.9372
City San Juan	State PR	
Zip Code 00926	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2954.94
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.9652

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

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 242 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Ivonne Otero Santiago		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address Calle 2 #77 Urb. Paseo Alto		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.9396
City San Juan State PR Zip Code 00926	Purpose of Disbursement Salary Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Ivonne Otero Santiago		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2012
Mailing Address Calle 2 #77 Urb. Paseo Alto		Amount of Each Disbursement this Period 13.40 Transaction ID : SB17.9795
City San Juan State PR Zip Code 00926	Purpose of Disbursement In-kind - Office Materials Candidate Name Category/Type	
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Ivonne Otero Santiago		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2012
Mailing Address Calle 2 #77 Urb. Paseo Alto		Amount of Each Disbursement this Period 293.31 Transaction ID : SB17.9416
City San Juan State PR Zip Code 00926	Purpose of Disbursement Reimbursement-Meals for campaign activity Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2306.71
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9416

Disbursement to original vendor: Costco Wholesale, 1185 65th Infantry Ave. San Juan, Bairoa Ward, Puerto Rico 00924-3403. Purpose: Meals for campaign staff activity. Total of disbursement: \$293.31 on 08/08/2012.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 244 OF 311			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Ivonne Otero Santiago		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2012
Mailing Address Calle 2 #77 Urb. Paseo Alto		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.9544
City San Juan State PR Zip Code 00926	Purpose of Disbursement Meals 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ivonne Otero Santiago		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2012
Mailing Address Calle 2 #77 Urb. Paseo Alto		Amount of Each Disbursement this Period 105.96 Transaction ID : SB17.9461
City San Juan State PR Zip Code 00926	Purpose of Disbursement Reimbursement-Meals and Water Supply 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Ivonne Otero Santiago		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2012
Mailing Address Calle 2 #77 Urb. Paseo Alto		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.9546
City San Juan State PR Zip Code 00926	Purpose of Disbursement Office Materials 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	205.96
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.9544

Disbursement under \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9461

Reimbursements of meals for campaign activity and water supply for campaign office expenses. Original vendor: Costco Wholesale, 1185 65th Infantry Ave., San Juan, Bairoa Ward, Puerto Rico 00924-3403. Amount: \$59.52. Purpose: Meals for campaign activity. Other disbursements under \$200 aggregated to the original vendor.

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

Form/Schedule: SB17

Transaction ID : SB17.9546

Disbursement under \$200 aggregated to the original vendor.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 247 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Ivonne Otero Santiago			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012	
Mailing Address Calle 2 #77 Urb. Paseo Alto			Amount of Each Disbursement this Period 2000.00	
City San Juan	State PR	Zip Code 00926	Transaction ID : SB17.9460	
Purpose of Disbursement Salary		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Ivonne Otero Santiago			Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012	
Mailing Address Calle 2 #77 Urb. Paseo Alto			Amount of Each Disbursement this Period 58.65	
City San Juan	State PR	Zip Code 00926	Transaction ID : SB17.9559	
Purpose of Disbursement Office Materials		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Piscalabis Bufe			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2012	
Mailing Address PO Box 1407			Amount of Each Disbursement this Period 345.61	
City Dorado	State PR	Zip Code 00646	Transaction ID : SB17.7564	
Purpose of Disbursement Fundraising Expense- Meals		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2404.26
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.9559

Disbursement under \$200 aggregated to the original vendor.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 249 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Pitney Bowes		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 362 Avenida de la Constitucion		Amount of Each Disbursement this Period 117.00
City San Juan State PR Zip Code 00901	Purpose of Disbursement Meter Rentar	
Candidate Name	Category/Type 001	Transaction ID : SB17.9411
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Yoly Prohias		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2012
Mailing Address PO Box 192273		Amount of Each Disbursement this Period 267.24
City San Juan State PR Zip Code 00919	Purpose of Disbursement In-kind - Fundraising Expenses-Beverages	
Candidate Name	Category/Type	Transaction ID : SB17.9684
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Yoly Prohias		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2012
Mailing Address PO Box 192273		Amount of Each Disbursement this Period 1850.00
City San Juan State PR Zip Code 00919	Purpose of Disbursement In-kind - Fundraising Expenses-Meals	
Candidate Name	Category/Type	Transaction ID : SB17.9685
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2234.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 250 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Restaurante Antonio			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012	
Mailing Address 1406 Magdalena Ave.			Amount of Each Disbursement this Period 1427.00	
City San Juan	State PR	Zip Code 00907	Transaction ID : SB17.9467	
Purpose of Disbursement Fundraising Expenses-Meals		Category/ Type 007		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Ricoh PR			Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2012	
Mailing Address National Plaza Bldg suite 1700 431 Ponce de Leon Ave.			Amount of Each Disbursement this Period 1126.75	
City San Juan	State PR	Zip Code 00917	Transaction ID : SB17.9458	
Purpose of Disbursement Office Equipment Rental-Copy Machine		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. A. Miguel Rios			Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012	
Mailing Address Valle Verde II Ap-1 Rio Maravilla Street			Amount of Each Disbursement this Period 1300.00	
City Bayamon	State PR	Zip Code 00961	Transaction ID : SB17.9347	
Purpose of Disbursement Sound vehicle rental		Category/ Type 007		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3853.75
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9347

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

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 252 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Miguel Rios		Date of Disbursement MM / DD / YYYY 07 / 12 / 2012
Mailing Address Valle Verde II Ap-1 Rio Maravilla Street		Amount of Each Disbursement this Period 1800.00 Transaction ID : SB17.9362
City Bayamon State PR Zip Code 00961	Purpose of Disbursement Sound Vehicle Rental Candidate Name Category/Type 007	
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. A. Miguel Rios		Date of Disbursement MM / DD / YYYY 07 / 26 / 2012
Mailing Address Valle Verde II Ap-1 Rio Maravilla Street		Amount of Each Disbursement this Period 1300.00 Transaction ID : SB17.9376
City Bayamon State PR Zip Code 00961	Purpose of Disbursement Sound Vehicle Rental Candidate Name Category/Type 007	
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. A. Miguel Rios		Date of Disbursement MM / DD / YYYY 08 / 03 / 2012
Mailing Address Valle Verde II Ap-1 Rio Maravilla Street		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB17.9395
City Bayamon State PR Zip Code 00961	Purpose of Disbursement Sound Vehicle Rental Candidate Name Category/Type 007	
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	5700.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.9362

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

Form/Schedule: SB17

Transaction ID: SB17.9376

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

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

Form/Schedule: SB17

Transaction ID : SB17.9395

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

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 255 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Miguel Rios		Date of Disbursement MM / DD / YYYY 08 / 07 / 2012
Mailing Address Valle Verde II Ap-1 Rio Maravilla Street		Amount of Each Disbursement this Period 1300.00 Transaction ID : SB17.9404
City Bayamon State PR Zip Code 00961	Purpose of Disbursement Sound Vehicle Rental Candidate Name Category/Type 007	
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. A. Miguel Rios		Date of Disbursement MM / DD / YYYY 08 / 16 / 2012
Mailing Address Valle Verde II Ap-1 Rio Maravilla Street		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB17.9441
City Bayamon State PR Zip Code 00961	Purpose of Disbursement Sound Vehicle Rental Candidate Name Category/Type 007	
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. A. Miguel Rios		Date of Disbursement MM / DD / YYYY 08 / 27 / 2012
Mailing Address Valle Verde II Ap-1 Rio Maravilla Street		Amount of Each Disbursement this Period 3250.00 Transaction ID : SB17.9436
City Bayamon State PR Zip Code 00961	Purpose of Disbursement Sound Vehicle Rental Candidate Name Category/Type 007	
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	7150.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: **SB17**

Transaction ID : **SB17.9404**

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

Form/Schedule: **SB17**

Transaction ID: **SB17.9441**

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

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

Form/Schedule: SB17

Transaction ID : SB17.9436

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

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 258 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Miguel Rios		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2012
Mailing Address Valle Verde II Ap-1 Rio Maravilla Street		Amount of Each Disbursement this Period 1950.00 Transaction ID : SB17.9456
City Bayamon State PR Zip Code 00961	Purpose of Disbursement Sound Vehicle Rental Candidate Name Category/Type 007	
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. A. Miguel Rios		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address Valle Verde II Ap-1 Rio Maravilla Street		Amount of Each Disbursement this Period 1950.00 Transaction ID : SB17.9466
City Bayamon State PR Zip Code 00961	Purpose of Disbursement Sound Vehicle Rental Candidate Name Category/Type	
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. A. Miguel Rios		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address Valle Verde II Ap-1 Rio Maravilla Street		Amount of Each Disbursement this Period 3250.00 Transaction ID : SB17.9481
City Bayamon State PR Zip Code 00961	Purpose of Disbursement Sound Vehicle Rental Candidate Name Category/Type 007	
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	7150.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9456

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

Form/Schedule: SB17

Transaction ID: SB17.9466

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

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

Form/Schedule: SB17

Transaction ID : SB17.9481

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

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 261 OF 311	
	<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. Miguel Rios		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2012
Mailing Address Valle Verde II Ap-1 Rio Maravilla Street		Amount of Each Disbursement this Period 3250.00 Transaction ID : SB17.9493
City Bayamon State PR Zip Code 00961	Purpose of Disbursement Sound Vehicle Rental Candidate Name Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. A. Miguel Rios		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address Valle Verde II Ap-1 Rio Maravilla Street		Amount of Each Disbursement this Period 3900.00 Transaction ID : SB17.9486
City Bayamon State PR Zip Code 00961	Purpose of Disbursement Sound Vehicle Rental Candidate Name Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Ana C. Rius Armendariz		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012
Mailing Address Urb. Santa Clara Roble Blanco St. F-11		Amount of Each Disbursement this Period 294.00 Transaction ID : SB17.7720
City Guaynabo State PR Zip Code 00969	Purpose of Disbursement In-kind - Fundraising expenses rentals Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7444.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.9493

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

Form/Schedule: SB17

Transaction ID: SB17.9486

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 263 OF 311	
	<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. Ana C. Rius Armendariz		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012
Mailing Address Urb. Santa Clara Roble Blanco St. F-11		Amount of Each Disbursement this Period 379.01 Transaction ID : SB17.7721
City Guaynabo	State PR	
Zip Code 00969	Purpose of Disbursement In-kind - Fundraising expenses Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Benito Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2012
Mailing Address Urb. Fuentes de Coamo #1347		Amount of Each Disbursement this Period 527.50 Transaction ID : SB17.9619
City Coamo	State PR	
Zip Code 00769	Purpose of Disbursement Fundraising Expenses-Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Benito Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address Urb. Fuentes de Coamo #1347		Amount of Each Disbursement this Period 527.50 Transaction ID : SB17.9621
City Coamo	State PR	
Zip Code 00769	Purpose of Disbursement Fundraising Expenses-Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1434.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 264 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Gladys Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2012
Mailing Address PO Box 71325 Suite 171		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.9782
City San Juan	State PR Zip Code 00396	
Purpose of Disbursement Transportation and meals expenses	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Jose Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address Carr. 723 Km. 0. Bo. Asomante		Amount of Each Disbursement this Period 1540.00 Transaction ID : SB17.9615
City Aibonito	State PR Zip Code 00705	
Purpose of Disbursement Fundraising Expenses-Meals	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Carmen Angeles Rodriguez Weber		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address Cond. Torre de los Frailes Apt. 11 J		Amount of Each Disbursement this Period 1860.00 Transaction ID : SB17.10957
City Guaynabo	State PR Zip Code 00969	
Purpose of Disbursement Salary	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3900.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9782

Advance for expenses of food and transportation on Democrat National Convention. Mrs. Rodriguez was assisting Mr. Cox Alomar on meetings and DNC activities. Mr. Cox was delegate. The advance was determined by multiplying the days of stay working at the DNC by an estimated of expenses of \$100. The staffer had to document all transactions. No disbursements over \$200 aggregated to one original vendor.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 266 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Carmen Angeles Rodriguez Weber		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2012
Mailing Address Cond. Torre de los Frailes Apt. 11 J		Amount of Each Disbursement this Period 50.00
City Guaynabo State PR Zip Code 00969	Purpose of Disbursement Meals expenses 001 Category/Type	
Candidate Name		Transaction ID : SB17.9541
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Carmen Angeles Rodriguez Weber		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address Cond. Torre de los Frailes Apt. 11 J		Amount of Each Disbursement this Period 1860.00
City Guaynabo State PR Zip Code 00969	Purpose of Disbursement Salary 001 Category/Type	
Candidate Name		Transaction ID : SB17.9397
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Carmen Angeles Rodriguez Weber		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2012
Mailing Address Cond. Torre de los Frailes Apt. 11 J		Amount of Each Disbursement this Period 94.92
City Guaynabo State PR Zip Code 00969	Purpose of Disbursement Reimbursement of meals and transportation expenses-gas expenses 002 Category/Type	
Candidate Name		Transaction ID : SB17.9434
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2004.92
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9541

Disbursements under \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9434

Disbursements under \$200 aggregated to the original vendor.

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 268 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Carmen Angeles Rodriguez Weber		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012
Mailing Address Cond. Torre de los Frailes Apt. 11 J		Amount of Each Disbursement this Period 1860.00 Transaction ID : SB17.9447
City Guaynabo State PR Zip Code 00969	Purpose of Disbursement Salary Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Carmen Angeles Rodriguez Weber		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address Cond. Torre de los Frailes Apt. 11 J		Amount of Each Disbursement this Period 49.57 Transaction ID : SB17.9558
City Guaynabo State PR Zip Code 00969	Purpose of Disbursement Petty Cash for the purchase of office materials-Envelopes Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Carmen Angeles Rodriguez Weber		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address Cond. Torre de los Frailes Apt. 11 J		Amount of Each Disbursement this Period 123.38 Transaction ID : SB17.9495
City Guaynabo State PR Zip Code 00969	Purpose of Disbursement Reimbursement of meals and transportation expenses-gas expenses Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2032.95
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9558

Disbursements under \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9495

Reimbursement of gas expenses made for fundraising activities. Mrs. Rodriguez was a fundraising coordinator for Cox Alomar 2012, Inc. Disbursements under \$200 to the original vendor.

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 270 OF 311	
	<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 Osba/Shell Abuosba		Date of Disbursement M M / D D / Y Y Y Y 07 / 04 / 2012
Mailing Address Urb. San Agustin 1426 Luisa Capetilo St.		Amount of Each Disbursement this Period 3157.34 Transaction ID : SB17.10940
City San Juan State PR Zip Code 00921	Purpose of Disbursement Transportation-Gas for campaign vehicle expenses Candidate Name Category/Type 002	
Office Sought: House Senate President Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Sami Abu Osba/Shell Abuosba		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address Urb. San Agustin 1426 Luisa Capetilo St.		Amount of Each Disbursement this Period 731.16 Transaction ID : SB17.9413
City San Juan State PR Zip Code 00921	Purpose of Disbursement Transportation-Gas expenses Candidate Name Category/Type 002	
Office Sought: House Senate President Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Sami Abu Osba/Shell Abuosba		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2012
Mailing Address Urb. San Agustin 1426 Luisa Capetilo St.		Amount of Each Disbursement this Period 1322.18 Transaction ID : SB17.9473
City San Juan State PR Zip Code 00921	Purpose of Disbursement Transportation-Gas Expenses Candidate Name Category/Type 002	
Office Sought: House Senate President Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3410.68
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 271 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Jorge Sanchez		Date of Disbursement MM / DD / YYYY 08 / 28 / 2012
Mailing Address 516 B Juan J. Jimenez St.		Amount of Each Disbursement this Period 778.72 Transaction ID : SB17.8282
City San Juan State PR Zip Code 00918	Purpose of Disbursement In-kind - Fundraising Expenses-Meals Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Christopher Sanchez Ortiz		Date of Disbursement MM / DD / YYYY 07 / 06 / 2012
Mailing Address PO Box 194555		Amount of Each Disbursement this Period 1395.00 Transaction ID : SB17.10949
City San Juan State PR Zip Code 00919	Purpose of Disbursement Salary Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Christopher Sanchez Ortiz		Date of Disbursement MM / DD / YYYY 07 / 10 / 2012
Mailing Address PO Box 194555		Amount of Each Disbursement this Period 232.50 Transaction ID : SB17.9354
City San Juan State PR Zip Code 00919	Purpose of Disbursement Reimbursement of meals and transportation-gas expenses Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2406.22
TOTAL This Period (last page this line number only).....	

: 97 `A -G7 9 @ @ B9 CI G`H9 LH`F9 @ H98 `HC `5 `F9 DCFH`G7 <98 I @ `CF `H9 A -N5 H-CB

Form/Schedule: SB17

Transaction ID : SB17.9354

Mr. Sanchez was Mr. Cox assistant. Monthly Cox Alomar 2012, Inc. reimbursed to Mr. Sanchez the expenses made on campaign activities and events, such as meals, gas and toll expenses. No disbursements over \$200 aggregated to the original vendor.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 273 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Christopher Sanchez Ortiz			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2012		
Mailing Address PO Box 194555			Amount of Each Disbursement this Period 100.00		
City San Juan	State PR	Zip Code 00919	Transaction ID : SB17.9536		
Purpose of Disbursement Toll Charges		Category/ Type 002			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Christopher Sanchez Ortiz			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012		
Mailing Address PO Box 194555			Amount of Each Disbursement this Period 1627.50		
City San Juan	State PR	Zip Code 00919	Transaction ID : SB17.9401		
Purpose of Disbursement Salary-July		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Christopher Sanchez Ortiz			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2012		
Mailing Address PO Box 194555			Amount of Each Disbursement this Period 1627.50		
City San Juan	State PR	Zip Code 00919	Transaction ID : SB17.9457		
Purpose of Disbursement Salary-August		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	3355.00
TOTAL This Period (last page this line number only).....	

: 97 `A`G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A`N5H`CB

Form/Schedule: SB17

Transaction ID : SB17.9536

Original vendor: Autoexpreso, Suite 106, 1st Floor, Metro Office Bldg. Office 3 1st. St., Guaynabo, Puerto Rico 00968.
Purpose: toll charges on 7/10/2012 Amount: \$100

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 275 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Christopher Sanchez Ortiz			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2012	
Mailing Address PO Box 194555			Amount of Each Disbursement this Period 851.97	
City San Juan	State PR	Zip Code 00919	Transaction ID : SB17.10938	
Purpose of Disbursement Meals and gas expenses		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Christopher Sanchez Ortiz			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2012	
Mailing Address PO Box 194555			Amount of Each Disbursement this Period 80.00	
City San Juan	State PR	Zip Code 00919	Transaction ID : SB17.9548	
Purpose of Disbursement Toll Charges		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Christopher Sanchez Ortiz			Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012	
Mailing Address PO Box 194555			Amount of Each Disbursement this Period 100.00	
City San Juan	State PR	Zip Code 00919	Transaction ID : SB17.9553	
Purpose of Disbursement Toll Charges		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1031.97
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.10938

Mr. Sanchez was Mr. Cox assistant. Monthly Cox Alomar 2012, Inc. reimbursed to Mr. Sanchez the expenses made on campaign activities and events, such as meals, gas and toll expenses. Original vendor: Autoexpreso, Suite 106, 1st Floor, Metro Office Bldg. Office 3 1st. St., Guaynabo, Puerto Rico 00968. Purpose: toll charges on 5/21/2012, \$10; 5/26/2012, \$20; 5/19/2012, \$20; 5/20/2012, \$20; 5/19/2012, \$50. Other disbursements under \$200 aggregated to the original vendor.

Form/Schedule: SB17

Transaction ID: SB17.9548

Original vendor: Autoexpreso, Suite 106, 1st Floor, Metro Office Bldg. Office 3 1st. St., Guaynabo, Puerto Rico 00968. Purpose: toll charges on 8/26/2012 Amount: \$80.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.9553

Original vendor: Autoexpreso, Suite 106, 1st Floor, Metro Office Bldg. Office 3 1st. St., Guaynabo, Puerto Rico 00968.
Purpose: toll charges on 9/04/2012 Amount: \$100.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 278 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Christopher Sanchez Ortiz		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address PO Box 194555		Amount of Each Disbursement this Period 1457.77 Transaction ID : SB17.9478
City San Juan	State PR	
Zip Code 00919	Purpose of Disbursement Reimbursement of meals and transportation expenses-gas expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Christopher Sanchez Ortiz		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2012
Mailing Address PO Box 194555		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.9560
City San Juan	State PR	
Zip Code 00919	Purpose of Disbursement Toll Charges	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Maria L. Santaella Arguinzoni		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012
Mailing Address PO Box 366676		Amount of Each Disbursement this Period 393.76 Transaction ID : SB17.9796
City San Juan	State PR	
Zip Code 00936	Purpose of Disbursement In-kind - T-Shirts	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1951.53
TOTAL This Period (last page this line number only).....	

: 97 `A -G79 @C B9CI G`H9LH`F9 @ H98 `HC `5 `F9DCFH`ZG7 <98I @ `CF `H9A -N5 H-CB

Form/Schedule: **SB17**

Transaction ID : **SB17.9478**

Mr. Sanchez was Mr. Cox assistant. Monthly Cox Alomar 2012, Inc. reimbursed to Mr. Sanchez the expenses made on campaign activities and events, such as meals, gas and toll expenses. Original vendors: Wyndham Rio Mar Beach Resort & Spa, 6000 Rio Mar Boulevard, Rios Grande, Puerto Rico 00745. Amount: \$197.60 on 06/22/2012. Purpose: Meals on campaign activity (Popular Democratic Party Convention). Best Buy, 230 Federico Costa St. Hato Rey, Puerto Rico 00918. Amount: \$213.98 on 05/22/2012. Purpose: Two broadband modems for campaign computers and two Virgin Mobile Cards of \$50 each for the modems. Autoexpreso, Suite 106, 1st Floor, Metro Office Bldg. Office 3 1st. St., Guaynabo, Puerto Rico 00968. Amounts: \$20.00 on 06/12/2012; \$20.00 on 04/07/2012; \$10.00 on 06/12/2012. Purpose: toll charges. Other disbursements under \$200 aggregated to the original vendor.

Form/Schedule: **SB17**

Transaction ID: **SB17.9560**

Original vendor: Autoexpreso, Suite 106, 1st Floor, Metro Office Bldg. Office 3 1st. St., Guaynabo, Puerto Rico 00968. Purpose: toll charges on 9/19/2012 Amount: \$100.

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 280 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Silva		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2012
Mailing Address Apartado 946		Amount of Each Disbursement this Period 350.00
City Humacao	State PR Zip Code 00767	
Purpose of Disbursement Fundraising Expense-Music	Category/Type 003	Transaction ID : SB17.8361
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Nilda Soto Mejias		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2012
Mailing Address Cond. Caguas Tower Apt 1107		Amount of Each Disbursement this Period 500.00
City Caguas	State PR Zip Code 00725	
Purpose of Disbursement Gas and meals expenses	Category/Type 002	Transaction ID : SB17.9611
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Nilda Soto Mejias		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address Cond. Caguas Tower Apt 1107		Amount of Each Disbursement this Period 500.00
City Caguas	State PR Zip Code 00725	
Purpose of Disbursement Gas and meals expenses	Category/Type 002	Transaction ID : SB17.9598
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9611

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

Form/Schedule: SB17

Transaction ID: SB17.9598

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 282 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Nilda Soto Mejias		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012
Mailing Address Cond. Caguas Tower Apt 1107		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.9586
City Caguas	State PR	
Zip Code 00725	Purpose of Disbursement Gas and meals expenses	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Nilda Soto Mejias		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2012
Mailing Address Cond. Caguas Tower Apt 1107		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.9556
City Caguas	State PR	
Zip Code 00725	Purpose of Disbursement Meals	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. The Office Shop		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2012
Mailing Address #11 Cardon Ave. Urb. Industrial Tres Monjitas		Amount of Each Disbursement this Period 52.97 Transaction ID : SB17.9377
City San Juan	State PR	
Zip Code 00919	Purpose of Disbursement Office Materials	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	602.97
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9586

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

Form/Schedule: SB17

Transaction ID: SB17.9556

Disbursement under \$200 aggregated to the original vendor.

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 284 OF 311			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. The Office Shop		Date of Disbursement MM / DD / YYYY 08 / 08 / 2012
Mailing Address #11 Cardon Ave. Urb. Industrial Tres Monjitas		Amount of Each Disbursement this Period 78.11
City San Juan	State PR	
Zip Code 00919	Purpose of Disbursement Office Materials	Transaction ID : SB17.9419
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Office Shop		Date of Disbursement MM / DD / YYYY 09 / 26 / 2012
Mailing Address #11 Cardon Ave. Urb. Industrial Tres Monjitas		Amount of Each Disbursement this Period 82.60
City San Juan	State PR	
Zip Code 00919	Purpose of Disbursement Office Materials	Transaction ID : SB17.9497
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Francisco Torres Pagan		Date of Disbursement MM / DD / YYYY 09 / 22 / 2012
Mailing Address Urb. Vega Linda Tomas Torres St #20		Amount of Each Disbursement this Period 248.26
City Jayuya	State PR	
Zip Code 00664	Purpose of Disbursement In-kind - Fundraising Expenses-Meals and Beverages	Transaction ID : SB17.9648
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	408.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 285 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Tu Nuevo Amanecer		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2012
Mailing Address 1519 Kelley Ave.		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.9593
City Kissimmee	State FL	
Zip Code 34744	Purpose of Disbursement Advertising-Newspaper	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Edgardo Miguel Vazquez Rivera		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address Tabonuco St. B-5 suite 216 PMB-112		Amount of Each Disbursement this Period 2325.00 Transaction ID : SB17.10953
City Guaynabo	State PR	
Zip Code 00968-3022	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Edgardo Miguel Vazquez Rivera		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2012
Mailing Address Tabonuco St. B-5 suite 216 PMB-112		Amount of Each Disbursement this Period 2325.00 Transaction ID : SB17.9400
City Guaynabo	State PR	
Zip Code 00968-3022	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 286 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Edgardo Miguel Vazquez Rivera		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2012
Mailing Address Tabonuco St. B-5 suite 216 PMB-112		Amount of Each Disbursement this Period 2325.00
City Guaynabo	State PR Zip Code 00968-3022	
Purpose of Disbursement Salary	Category/Type 001	Transaction ID : SB17.9410
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Edgardo Miguel Vazquez Rivera		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2012
Mailing Address Tabonuco St. B-5 suite 216 PMB-112		Amount of Each Disbursement this Period 2325.00
City Guaynabo	State PR Zip Code 00968-3022	
Purpose of Disbursement Salary	Category/Type 001	Transaction ID : SB17.9409
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Edgardo Miguel Vazquez Rivera		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2012
Mailing Address Tabonuco St. B-5 suite 216 PMB-112		Amount of Each Disbursement this Period 700.00
City Guaynabo	State PR Zip Code 00968-3022	
Purpose of Disbursement Food and transportation-DNC Expenses	Category/Type 002	Transaction ID : SB17.9786
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5350.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.9786

Advance for expenses of food and transportation on Democrat National Convention. Mr. Vazquez was assisting Mr. Cox Alomar on meetings, advising on political issues and was involved on efforts to raise contributions. Mr. Cox was delegate. The advance was determined by multiplying the days of stay working at the DNC by an estimated of expenses of \$100. The staffer had to document all transactions. Mr. Vazquez made a total of disbursements of \$1,621.99, reimbursed on 9/19/2012.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 288 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Edgardo Miguel Vazquez Rivera			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2012	
Mailing Address Tabonuco St. B-5 suite 216 PMB-112			Amount of Each Disbursement this Period 2325.00	
City Guaynabo	State PR	Zip Code 00968-3022	Transaction ID : SB17.9450	
Purpose of Disbursement Salary		001 Category/Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. Edgardo Miguel Vazquez Rivera			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2012	
Mailing Address Tabonuco St. B-5 suite 216 PMB-112			Amount of Each Disbursement this Period 50.27	
City Guaynabo	State PR	Zip Code 00968-3022	Transaction ID : SB17.9547	
Purpose of Disbursement Reimbursement-Meals		001 Category/Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) c. Edgardo Miguel Vazquez Rivera			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2012	
Mailing Address Tabonuco St. B-5 suite 216 PMB-112			Amount of Each Disbursement this Period 921.99	
City Guaynabo	State PR	Zip Code 00968-3022	Transaction ID : SB17.9489	
Purpose of Disbursement Reimbursement-Meals and transportation-DNC Expenses		001 Category/Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	3297.26
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: **SB17**

Transaction ID : **SB17.9547**

Reimbursement of meals expenses made on campaign meeting. Disbursement to the original vendor under \$200 aggregated.

Form/Schedule: **SB17**

Transaction ID: **SB17.9489**

Reimbursement of expenses made for food and transportation on Democrat National Convention. Mr. Vazquez was Cox Alomar 2012, Inc. Political Director. He was assisting Mr. Cox Alomar on meetings, advising on political issues and was involved on efforts to raise contributions on the Democratic National Convention. Mr. Cox was delegate. Payment to orginial vendor: Enterprise, 424 Air Ramp Road, Charlotte, NC 28214. Made on sept-1-2012. Total of original disbursement: \$864.42. Purpose: Transportation for the staff and candidate, car rental. Other disbursements under \$200 agreggated to the original vendor.

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 290 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Edgardo Miguel Vazquez Rivera		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2012
Mailing Address Tabonuco St. B-5 suite 216 PMB-112		Amount of Each Disbursement this Period 2325.00 Transaction ID : SB17.9490
City Guaynabo State PR Zip Code 00968-3022	Purpose of Disbursement Salary Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Vias Car Rental of P.R.		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2012
Mailing Address Urb. Costa de Oro C-2 Marginal St.		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.10974
City Dorado State PR Zip Code 00646-2055	Purpose of Disbursement Campaign vehicle rental Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Vias Car Rental of PR		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address Isla Verde		Amount of Each Disbursement this Period 1698.39 Transaction ID : SB17.9487
City Carolina State PR Zip Code 00979	Purpose of Disbursement Campaign Vehicles Rental Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8023.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 291 OF 311	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Vias Car Rental of PR		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address Isla Verde		Amount of Each Disbursement this Period 2500.00
City Carolina	State PR	
Zip Code 00979	Purpose of Disbursement Campaign Vehicles Rental	Transaction ID : SB17.9488
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Wave Ranch Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2012
Mailing Address HC 72 Box 3766 PMB 323		Amount of Each Disbursement this Period 552.12
City Naranjito	State PR	
Zip Code 00719-9788	Purpose of Disbursement Campaing Shirts	Transaction ID : SB17.9476
Candidate Name	Category/ Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3052.12
TOTAL This Period (last page this line number only).....	275633.28

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 292 OF 311	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 132.15 Transaction ID : SB21.9865
City San Juan	State PR Zip Code 00936-2708	
Purpose of Disbursement Bank Fee	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	132.15
TOTAL This Period (last page this line number only).....	132.15

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

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

Outstanding Balance Beginning This Period	Transaction ID : SD9.4979	
<input type="text" value="100.01"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="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		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

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		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER:
(check only one)

9
 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

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

Mailing Address Urb. Roosevelt
Canals St. #451

City State Zip Code
San Juan PR 00918

Outstanding Balance Beginning This Period

1400.00

Transaction ID : SD10.7470

Amount Incurred This Period

0.00

Payment This Period

1302.00

Outstanding Balance at Close of This Period

98.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Audio Visual Consultants Inc.

Nature of Debt (Purpose):
Popular Democratic Party Convention-
Technology rental

Mailing Address PO Box 5999

City State Zip Code
Caguas PR 00726

Outstanding Balance Beginning This Period

3550.00

Transaction ID : SD10.7193

Amount Incurred This Period

0.00

Payment This Period

3550.00

Outstanding Balance at Close of This Period

0.00

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

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

Mailing Address Tintillo Gardens
6 St. M-21

City State Zip Code
Guaynabo PR 00966

Outstanding Balance Beginning This Period

1500.00

Transaction ID : SD10.7202

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

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

1598.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 295 OF 311
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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 0.00	Transaction ID : SD10.9862	
Amount Incurred This Period 1460.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1460.00

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

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

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

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

1) SUBTOTALS This Period This Page (optional)	6590.80
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

Mailing Address Centro Intl de Mercadeo Torre 1
 Suite 406

City State Zip Code
 Guaynabo PR 00968

Nature of Debt (Purpose):
 Advertising Consulting Services

Outstanding Balance Beginning This Period **Transaction ID : SD10.5770**
 18000.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
 0.00 0.00 18000.00

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

Mailing Address Centro Intl de Mercadeo Torre 1
 Suite 406

City State Zip Code
 Guaynabo PR 00968

Nature of Debt (Purpose):
 Campaign Media and Promotion

Outstanding Balance Beginning This Period **Transaction ID : SD10.7212**
 150.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
 0.00 0.00 150.00

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

Mailing Address Centro Intl de Mercadeo Torre 1
 Suite 406

City State Zip Code
 Guaynabo PR 00968

Nature of Debt (Purpose):
 Campaign Media and Promotion

Outstanding Balance Beginning This Period **Transaction ID : SD10.7213**
 600.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
 0.00 0.00 600.00

1) SUBTOTALS This Period This Page (optional)	▶	18750.00
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
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
1200.00

Transaction ID : SD10.7214

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 1200.00

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

Nature of Debt (Purpose):
Campaign Media and Promotion-Social Media

Mailing Address Centro Intl de Mercadeo Torre 1
Suite 406

City State Zip Code
Guaynabo PR 00968

Outstanding Balance Beginning This Period
2160.00

Transaction ID : SD10.7215

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 2160.00

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

Nature of Debt (Purpose):
Campaign Media and Promotion-Social Media

Mailing Address Centro Intl de Mercadeo Torre 1
Suite 406

City State Zip Code
Guaynabo PR 00968

Outstanding Balance Beginning This Period
2160.00

Transaction ID : SD10.7216

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 2160.00

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

5520.00

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

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

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

Outstanding Balance Beginning This Period 2160.00	Transaction ID : SD10.7217	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2160.00

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

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

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

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

1) SUBTOTALS This Period This Page (optional)	2492.93
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

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

Form/Schedule: SD10

Transaction ID : SD10.4256

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

Form/Schedule:

Transaction ID:

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

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Compania de Teatros Coribantes, Inc.		Nature of Debt (Purpose): Popular Democratic Party Convention-Artistic services
Mailing Address Box 22998		
City	State	Zip Code
San Juan	PR	00931

Outstanding Balance Beginning This Period	Transaction ID : SD10.7184	
4600.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	4600.00	0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jose Cruz		Nature of Debt (Purpose): Professional services- Media advisor
Mailing Address PO Box 443		
City	State	Zip Code
Juncos	PR	00777

Outstanding Balance Beginning This Period	Transaction ID : SD10.7477	
2000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	1860.00	140.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jose Cruz		Nature of Debt (Purpose): Salary
Mailing Address PO Box 443		
City	State	Zip Code
Juncos	PR	00777

Outstanding Balance Beginning This Period	Transaction ID : SD10.9854	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
2000.00	0.00	2000.00

1) SUBTOTALS This Period This Page (optional)	2140.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 301 OF 311
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Eastern America Insurance Agency, Inc.	Nature of Debt (Purpose): Insurance
Mailing Address PO Box 193900	
City State Zip Code San Juan PR 00919	

Outstanding Balance Beginning This Period 1227.00	Transaction ID : SD10.7490	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1227.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Facilities Management and Janitorial Services	Nature of Debt (Purpose): janitorial services - committee's offices
Mailing Address PO Box 366586	
City State Zip Code San Juan PR 00936-6586	

Outstanding Balance Beginning This Period 220.00	Transaction ID : SD10.5774	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 220.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carl Gibbs Acosta	Nature of Debt (Purpose): Professional services- Statistics analyst
Mailing Address Cape Village B-4 Buzon 110	
City State Zip Code Carolina PR 00979	

Outstanding Balance Beginning This Period 2000.00	Transaction ID : SD10.7472	
Amount Incurred This Period 0.00	Payment This Period 1860.00	Outstanding Balance at Close of This Period 140.00

1) SUBTOTALS This Period This Page (optional)	1587.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

Nature of Debt (Purpose):
Salary

Mailing Address Cape Village B-4 Buzon 110

City State Zip Code
Carolina PR 00979

Outstanding Balance Beginning This Period

Transaction ID : SD10.9855

0.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

2000.00

0.00

2000.00

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

Nature of Debt (Purpose):
Professional services-Campaign director

Mailing Address Apartado 367746

City State Zip Code
San Juan PR 00936-7746

Outstanding Balance Beginning This Period

Transaction ID : SD10.7482

5000.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

0.00

4650.00

350.00

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

Nature of Debt (Purpose):
Salary

Mailing Address Apartado 367746

City State Zip Code
San Juan PR 00936-7746

Outstanding Balance Beginning This Period

Transaction ID : SD10.9858

0.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

5000.00

0.00

5000.00

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

7350.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 303 OF 311
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Importadora Espanola		Nature of Debt (Purpose): office furniture for Cox Alomar Committee
Mailing Address Corporate Office Park Road No. 20 Suite 500		
City	State	Zip Code
Guaynabo	PR	00966

Outstanding Balance Beginning This Period	Transaction ID : SD10.5752	
<input type="text" value="2242.21"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2242.21"/>

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

Outstanding Balance Beginning This Period	Transaction ID : SD10.7476	
<input type="text" value="2500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="2325.00"/>	<input type="text" value="175.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="2916.31"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

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

City State Zip Code
 San Juan PR 00917

Nature of Debt (Purpose):
 Salary

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

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

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

Mailing Address Urb. Ls Caobos

City State Zip Code
 Ponce PR 00717

Nature of Debt (Purpose):
 Meals and beverages for fundraising event

Outstanding Balance Beginning This Period **Transaction ID : SD10.7197**

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
Israel Morales Alicea

Mailing Address Terranova 4B9 St.

City State Zip Code
 Guaynabo PR 00969

Nature of Debt (Purpose):
 Salary

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

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

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="5000.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ernesto Morales Ramos		Nature of Debt (Purpose): Reimbursement of meals and gasoline expenses
Mailing Address 2 Cond. San Francisco VLG Apt. 109		
City State	Zip Code	
Carolina	PR 00987-6950	

Outstanding Balance Beginning This Period	Transaction ID : SD10.7186	
<input type="text" value="107.03"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="107.03"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ernesto Morales Ramos		Nature of Debt (Purpose): Professional services- Media Advisor
Mailing Address 2 Cond. San Francisco VLG Apt. 109		
City State	Zip Code	
Carolina	PR 00987-6950	

Outstanding Balance Beginning This Period	Transaction ID : SD10.7475	
<input type="text" value="4500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="4114.50"/>	<input type="text" value="385.50"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ernesto Morales Ramos		Nature of Debt (Purpose): Salary
Mailing Address 2 Cond. San Francisco VLG Apt. 109		
City State	Zip Code	
Carolina	PR 00987-6950	

Outstanding Balance Beginning This Period	Transaction ID : SD10.9856	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="3250.00"/>	<input type="text" value="0.00"/>	<input type="text" value="3250.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="3742.53"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor One Link Communications		Nature of Debt (Purpose): Office expenses-Telephone and internet services
Mailing Address PO Box 192296		
City State	Zip Code	
San Juan	PR 00919-2296	

Outstanding Balance Beginning This Period	Transaction ID : SD10.7203	
<input type="text" value="628.11"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="628.11"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ivonne Otero Santiago		Nature of Debt (Purpose): Salary
Mailing Address Calle 2 #77 Urb. Paseo Alto		
City State	Zip Code	
San Juan	PR 00926	

Outstanding Balance Beginning This Period	Transaction ID : SD10.9859	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2140.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2140.00"/>

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

Outstanding Balance Beginning This Period	Transaction ID : SD10.5772	
<input type="text" value="351.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="351.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="2491.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

Mailing Address 1406 Magdalena Ave.

City State Zip Code
 San Juan PR 00907

Nature of Debt (Purpose):
 Fundraising Expenses

Outstanding Balance Beginning This Period **Transaction ID : SD10.9641**

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

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

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

City State Zip Code
 San Juan PR 00917

Nature of Debt (Purpose):
 copy machine

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

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
Ricoh PR

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

City State Zip Code
 San Juan PR 00917

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

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

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

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="4050.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

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

Outstanding Balance Beginning This Period 3250.00	Transaction ID : SD10.7196	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3250.00

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

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

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

Outstanding Balance Beginning This Period 2000.00	Transaction ID : SD10.7471	
Amount Incurred This Period 0.00	Payment This Period 1860.00	Outstanding Balance at Close of This Period 140.00

1) SUBTOTALS This Period This Page (optional)	15090.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 309 OF 311
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

Outstanding Balance Beginning This Period	Transaction ID : SD10.7219	
<input type="text" value="1357.34"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="1357.34"/>	<input type="text" value="0.00"/>

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

Outstanding Balance Beginning This Period	Transaction ID : SD10.9851	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1970.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1970.00"/>

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

Outstanding Balance Beginning This Period	Transaction ID : SD10.7199	
<input type="text" value="851.87"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="851.97"/>	<input type="text" value="-0.10"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="1969.90"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 310 OF 311
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

Outstanding Balance Beginning This Period	Transaction ID : SD10.7473	
<input type="text" value="1500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="1395.00"/>	<input type="text" value="105.00"/>

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

Outstanding Balance Beginning This Period	Transaction ID : SD10.9857	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1500.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1500.00"/>

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

Outstanding Balance Beginning This Period	Transaction ID : SD10.7474	
<input type="text" value="2500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="2325.00"/>	<input type="text" value="175.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="1780.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.9852	
Amount Incurred This Period 5000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

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

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.9863	
Amount Incurred This Period 14787.66	Payment This Period 4000.00	Outstanding Balance at Close of This Period 10787.66

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Vias Car Rental of PR		Nature of Debt (Purpose): Campaign vehicles rental.
Mailing Address Isla Verde		
City Carolina	State PR	Zip Code 00979

Outstanding Balance Beginning This Period 1803.00	Transaction ID : SD10.7201	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1803.00

1) SUBTOTALS This Period This Page (optional)	17590.66
2) TOTALS This Period (last page this line number only)	100659.13
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) ▶	100659.13