



## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 23

Write or Type Committee Name

COX ALOMAR 2012 , INC.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
10			01			2011			

To:

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2011			

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	17761.83	17761.83
(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)).....	17761.83	17761.83
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	6356.50	6356.50
(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)).....	6356.50	6356.50
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	10900.87	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	4400.00	

**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:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	15861.83	15861.83
(ii) Unitemized.....	1900.00	1900.00
(iii) TOTAL of contributions from individuals ▶	17761.83	17761.83
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	17761.83	17761.83
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	17761.83	17761.83

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6356.50	6356.50
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 .....	504.46	504.46
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	6860.96	6860.96

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	17761.83
25. SUBTOTAL (add Line 23 and Line 24).....	17761.83
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6860.96
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	10900.87

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 23
	<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) <b>A. Roberto E Aquino</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 15 / 2011
Mailing Address HC 3 Box 12929		<b>Transaction ID : SA11AI.4194</b>
City Carolina	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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Manuel E. Avila De Jesus</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 11 / 2011
Mailing Address P. O. Box 8155		<b>Transaction ID : SA11AI.4105</b>
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 attorney	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>C. Myrna L. Carrion Parrilla</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 15 / 2011
Mailing Address Urb. Los Padros - El Valle #249		<b>Transaction ID : SA11AI.4127</b>
City Caguas	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 Administrator	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	800.00
<b>TOTAL</b> 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 6 OF 23
	<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) <b>A. Francisco Cebollero</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 02 / 2011	
Mailing Address P.O. Box 3146		<b>Transaction ID : SA11AI.4175</b>	
City Mayaguez	State PR	Zip Code 00681-3146	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Robert Crespo Zamora</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 13 / 2011	
Mailing Address P.O. Box 29603		<b>Transaction ID : SA11AI.4227</b>	
City San Juan	State PR	Zip Code 00929	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer self-employed	Occupation Physician		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>C. Nylmer Cruz Pagan</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 15 / 2011	
Mailing Address P.O. Box 6798		<b>Transaction ID : SA11AI.4160</b>	
City San Juan	State PR	Zip Code 00914	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00	
Name of Employer Jhonson & Jhonson	Occupation Marketing		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1950.00
<b>TOTAL</b> 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 7 OF 23
	<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)  
**Apolinar De los Santos Matas**

Mailing Address Santa Juanita Avenue  
Esq. Alfa St. #52

City Bayamon State PR Zip Code 00952

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

Name of Employer self-employed Occupation Merchandiser

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  
12 / 15 / 2011

**Transaction ID : SA11AI.4158**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Carlos A. Falcon Ruiz**

Mailing Address Urb. Paseo Mayor  
C-11 Street #8

City San Juan, State PR Zip Code 00926

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

Name of Employer PR Supplies 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  
12 / 11 / 2011

**Transaction ID : SA11AI.4116**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**Simon K. Falzon**

Mailing Address P.O. Box 190459

City San Juan State PR Zip Code 00919-0459

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

Name of Employer CIZI Media Inc. Occupation Merchandiser

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  
12 / 11 / 2011

**Transaction ID : SA11AI.4111**

Amount of Each Receipt this Period  
450.00

**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 23
	<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) <b>A. Simon K. Falzon</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 11 / 2011
Mailing Address P.O. Box 190459		<b>Transaction ID : SA11AI.4113</b>
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 CIZI Media Inc.	Occupation Merchandiser	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) <b>B. Marcos Feliciano</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 19 / 2011
Mailing Address Urb. Villa Caparra #19		<b>Transaction ID : SA11AI.4183</b>
City Guaynabo	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer M. F. Insurance Group Inc.	Occupation Insurance Broker	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Carls E. Girod Morales</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 06 / 2011
Mailing Address P.O. Box 13617		<b>Transaction ID : SA11AI.4197</b>
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 self-employed	Occupation Physician	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2300.00
<b>TOTAL</b> 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 9 OF 23
	<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)  
**Cesar Gomez Rivera**

Mailing Address **PMB 353 35 Juan C. Borbon STE 67**

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

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

Name of Employer **self-employed** Occupation **Physician**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 15 / 2011**

**Transaction ID : SA11AI.4161**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Edgardo Hernandez Vila**

Mailing Address **Cond. Alto Reales  
354 Villa Catalina Apt. 928**

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

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

Name of Employer **Medtronic** Occupation **Sales Representative**

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  
**11 / 28 / 2011**

**Transaction ID : SA11AI.4173**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Carlos G. Lajara**

Mailing Address **Urb. Arbolada**

City **E-3 Roble St.** State **PR** Zip Code **00727-1305**

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

Name of Employer **Ferguson Puerto Rico Inc.** Occupation **General Manager**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **360.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 15 / 2011**

**Transaction ID : SA11AI.4192**

Amount of Each Receipt this Period  
**360.00**

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

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

**1110.00**

**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 23
	<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)  
**Gilberto Lajara Castillo**

Mailing Address Urb. Arboleda  
Robles St. E-13

City Caguas State PR Zip Code 00727

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

Name of Employer Businessman Occupation self-employed

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
437.74

Date of Receipt  
12 / 15 / 2011

**Transaction ID : SA11AI.4222**

Amount of Each Receipt this Period  
437.74

In-kind - fundraising expenses for beverages and invitations

**B.** Full Name (Last, First, Middle Initial)  
**Gilberto Lajara Castillo**

Mailing Address Urb. Arboleda  
Robles St. E-13

City Caguas State PR Zip Code 00727

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

Name of Employer Businessman Occupation self-employed

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
437.74

Date of Receipt  
12 / 15 / 2011

**Transaction ID : SA11AI.4225**

Amount of Each Receipt this Period  
1488.40

catering cost for fundraising event

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Roberto M. Leon Iglesias**

Mailing Address Urb. Ciudad Jardin  
173 Anamu St.

City Gurabo State PR Zip Code 00778

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

Name of Employer CSA Grave Occupation Engineer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
12 / 11 / 2011

**Transaction ID : SA11AI.4120**

Amount of Each Receipt this Period  
300.00

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

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

737.74

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4225

Catering costs for fundraising event reimbursed.

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 12 OF 23
	<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 H. Morales Martinez**

Mailing Address Urb. La Mansion  
ND13 Ramada St.

City Toa Baja State PR Zip Code 00949

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

Name of Employer self-employed Occupation Merchandiser

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  
 12 / 15 / 2011

**Transaction ID : SA11AI.4151**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Leonides Parrilla De Carrion**

Mailing Address Urb. Villa Blanca  
U-11 Crisolita St.

City Caguas State PR Zip Code 00725

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

Name of Employer Colegio Cristo de los Milagros Occupation Teacher

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  
 12 / 15 / 2011

**Transaction ID : SA11AI.4163**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Rebeca M. Peralta Castillo**

Mailing Address 71 Washington St.

City San Juan State PR Zip Code 00907-2106

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

Name of Employer none Occupation 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  
 12 / 18 / 2011

**Transaction ID : SA11AI.4185**

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

**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 23
	<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)  
**Edwin Ramos Rosa**

Mailing Address Urb. Levittown  
Ambar St. J2714

City Toa Baja State PR Zip Code 00949

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

Name of Employer self-employed Occupation Merchandiser

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  
12 / 15 / 2011

**Transaction ID : SA11AI.4126**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Marisol Rivera Rodriguez**

Mailing Address Urb. El Vedado  
219 Almirante Pinzon Apt 3

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  
375.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 15 / 2011

**Transaction ID : SA11AI.4170**

Amount of Each Receipt this Period  
375.00

**C.** Full Name (Last, First, Middle Initial)  
**Ruggles I. Robledo Irizarry**

Mailing Address Cond. Villas del Senorial Apt. 104

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  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 15 / 2011

**Transaction ID : SA11AI.4149**

Amount of Each Receipt this Period  
250.00

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

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

725.00

**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 14 OF 23
	<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)  
**Myriam J Silva**

Mailing Address Urb. Prado Alto St. # 1 J-13

City State Zip Code  
Guaynabo PR 00966

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

Name of Employer Occupation  
Maru Silva Art Direction Artist

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  
12 / 02 / 2011

**Transaction ID : SA11AI.4207**

Amount of Each Receipt this Period  
850.00

In-kind - campaign logo design

**B.** Full Name (Last, First, Middle Initial)  
**Guaili A. Sosa Pascual**

Mailing Address Cond. Laguna Terrace  
6 Mariano Rodriguez Apt. 1A

City State Zip Code  
San Juan PR 00907

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

Name of Employer Occupation  
self-employed company man

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  
12 / 20 / 2011

**Transaction ID : SA11AI.4181**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Guaili A. Sosa Pascual**

Mailing Address Cond. Laguna Terrace  
6 Mariano Rodriguez Apt. 1A

City State Zip Code  
San Juan PR 00907

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

Name of Employer Occupation  
self-employed company man

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1339.09

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 20 / 2011

**Transaction ID : SA11AI.4210**

Amount of Each Receipt this Period  
339.09

In-kind - coffee cost and room rental for fundraising

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

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

2189.09

**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 23
	<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) <b>A. Robert Stolberg Acosta</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 29 / 2011
Mailing Address Tetuan St. #200		<b>Transaction ID : SA11AI.4199</b>
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 UPR School of Medicine	Occupation Physician	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. Jose M Varela Fernandez</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 15 / 2011
Mailing Address P.O. Box 373301		<b>Transaction ID : SA11AI.4145</b>
City Cayey	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 Attorney	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>C. Luis E Vazquez Rodriguez</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 20 / 2011
Mailing Address P.O. Box 195498		<b>Transaction ID : SA11AI.4187</b>
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 self-employed	Occupation Attorney	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> 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 16 OF 23
	<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) <b>A. Enrique J. Vila Biaggi</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 11 / 2011	
Mailing Address Urb. Torrimar		<b>Transaction ID : SA11Al.4201</b>	
City State Zip Code I-7 Alhambra St. PR 00966	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation self-employed Engineer		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address		Amount of Each Receipt this Period	
City State Zip Code	Name of Employer Occupation		
FEC ID number of contributing federal political committee. C	Election Cycle-to-Date		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Amount of Each Receipt this Period		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address		Amount of Each Receipt this Period	
City State Zip Code	Name of Employer Occupation		
FEC ID number of contributing federal political committee. C	Election Cycle-to-Date		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Amount of Each Receipt this Period		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	15861.83



**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 17 OF 23	
	<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) <b>A. Sami Abu Osba</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2011
Mailing Address Urb. San Agustin 1426 Luisa Capetilo St.		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.4229</b>
City San Juan State PR Zip Code 00921	Purpose of Disbursement gasoline costs for campaign vehicle Category/Type 002	
Candidate Name <b>COX ALOMAR 2012 , INC.</b>	Office Sought: <input checked="" 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: PR District: 01		

Full Name (Last, First, Middle Initial) <b>B. Manuel E. Avila De Jesus</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2011
Mailing Address P. O. Box 8155		Amount of Each Disbursement this Period 1107.24 <b>Transaction ID : SB17.4221</b>
City San Juan State PR Zip Code 00910-0155	Purpose of Disbursement reimbursement for car rental, gas, and printing costs Category/Type 002	
Candidate Name <b>COX ALOMAR 2012 , INC.</b>	Office Sought: <input checked="" 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: PR District: 01		

Full Name (Last, First, Middle Initial) <b>c. Pedro Clemente Quinones</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2011
Mailing Address Urb. Country Club 1100 Carmen Busello St.		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : SB17.4257</b>
City San Juan State PR Zip Code 00924	Purpose of Disbursement Campaign Jingle Category/Type 004	
Candidate Name <b>COX ALOMAR 2012 , INC.</b>	Office Sought: <input checked="" 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: PR District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2257.24
<b>TOTAL</b> 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 18 OF 23	
	<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) <b>A. Gilberto Lajara Castillo</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2011
Mailing Address Urb. Arboleda Robles St. E-13		Amount of Each Disbursement this Period 437.74 <b>Transaction ID : SB17.4224</b>
City Caguas	State PR Zip Code 00727	
Purpose of Disbursement In-kind - fundraising expenses for beverages and invitations		Category/ Type
Candidate Name		
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>B. Gilberto Lajara Castillo</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2011
Mailing Address Urb. Arboleda Robles St. E-13		Amount of Each Disbursement this Period 1488.40 <b>Transaction ID : SB17.4226</b> <b>[MEMO ITEM]</b>
City Caguas	State PR Zip Code 00727	
Purpose of Disbursement Reimbursement for catering costs for fundraising event. Refer to memo entry on Schedule A		Category/ Type 003
Candidate Name <b>COX ALOMAR 2012 , INC.</b>		
Office Sought: <input checked="" 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: PR District: 01		

Full Name (Last, First, Middle Initial) <b>c. Jaime Luis Sanabria Montanez</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2011
Mailing Address P.O. Box 367921		Amount of Each Disbursement this Period 247.22 <b>Transaction ID : SB17.4217</b>
City San Juan	State PR Zip Code 00936-7921	
Purpose of Disbursement reimbursement for food costs		Category/ Type 007
Candidate Name <b>COX ALOMAR 2012 , INC.</b>		
Office Sought: <input checked="" 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: PR District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	684.96
<b>TOTAL</b> This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.4226

Refer to memo entry contribution on Schedule A, reimbursement for \$1488.40 for catering cost expenses for fundraising event. This person also contributed this period with \$437.74 In kind and it was only reported on Schedule A as this amount was not to be reimbursed. Since contribution plus advance minus reimbursement is over \$200; the advance is reported on Schedule A as memo entry and the reimbursement, which is over \$200, is reported on Schedule B as memo entry.

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 20 OF 23			
	<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) <b>A. Myriam J Silva</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2011	
Mailing Address Urb. Prado Alto St. # 1 J-13			Amount of Each Disbursement this Period 850.00	
City Guaynabo	State PR	Zip Code 00966	Transaction ID : SB17.4208	
Purpose of Disbursement In-kind - campaign logo design		Category/ Type		
Candidate Name				
Office Sought:	<input checked="" 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>B. Myriam J Silva</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2011	
Mailing Address Urb. Prado Alto St. # 1 J-13			Amount of Each Disbursement this Period 850.00	
City Guaynabo	State PR	Zip Code 00966	Transaction ID : SB17.4213	
Purpose of Disbursement in kind - campaign logo design		Category/ Type 006		
Candidate Name <b>COX ALOMAR 2012 , INC.</b>				
Office Sought:	<input checked="" 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: PR	District: 01			

Full Name (Last, First, Middle Initial) <b>c. Myriam J Silva</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2011	
Mailing Address Urb. Prado Alto St. # 1 J-13			Amount of Each Disbursement this Period 150.00	
City Guaynabo	State PR	Zip Code 00966	Transaction ID : SB17.4203	
Purpose of Disbursement digital copies of campaign logo		Category/ Type 006		
Candidate Name <b>COX ALOMAR 2012 , INC.</b>				
Office Sought:	<input checked="" 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: PR	District: 01			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1850.00
<b>TOTAL</b> 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 21 OF 23	
	<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) <b>A. Guaili A. Sosa Pascual</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2011
Mailing Address Cond. Laguna Terrace 6 Mariano Rodriguez Apt. 1A		Amount of Each Disbursement this Period 339.09 <b>Transaction ID : SB17.4211</b>
City San Juan State PR Zip Code 00907	Purpose of Disbursement In-kind - coffee cost and room rental for fundraising	
Candidate Name	Category/Type	
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>B. Guaili A. Sosa Pascual</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2011
Mailing Address Cond. Laguna Terrace 6 Mariano Rodriguez Apt. 1A		Amount of Each Disbursement this Period 339.09 <b>Transaction ID : SB17.4212</b>
City San Juan State PR Zip Code 00907	Purpose of Disbursement in-kind coffe cost and room rental for fundraising	
Candidate Name <b>COX ALOMAR 2012 , INC.</b>	Category/Type 003	
Office Sought: <input checked="" 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: PR District: 01		

Full Name (Last, First, Middle Initial) <b>c. Vias Car Rental of P.R.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2011
Mailing Address Urb. Costa de Oro C-2 Marginal St.		Amount of Each Disbursement this Period 536.05 <b>Transaction ID : SB17.4205</b>
City Dorado State PR Zip Code 00646-2055	Purpose of Disbursement car rental	
Candidate Name <b>COX ALOMAR 2012 , INC.</b>	Category/Type 002	
Office Sought: <input checked="" 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: PR District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1214.23
<b>TOTAL</b> This Period (last page this line number only).....	6006.43

**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 22 OF 23	
	<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) <b>A. Banco Popular de Puerto Rico</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2011
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 408.00 <b>Transaction ID : SB21.4242</b>
City San Juan State PR Zip Code 00936-2708	Purpose of Disbursement deposit and activation fee for Visa Travel Money Card Category/Type 002	
Candidate Name <b>COX ALOMAR 2012 , INC.</b>	Office Sought: <input checked="" 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: PR District: 01		

Full Name (Last, First, Middle Initial) <b>B.</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) <b>C.</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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	408.00
<b>TOTAL</b> This Period (last page this line number only).....	408.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**COX ALOMAR 2012 , INC.**

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

Mailing Address P.O Box 50045

City State Zip Code  
 San Juan PR 00902

Nature of Debt (Purpose):  
 Car Rental

Outstanding Balance Beginning This Period **Transaction ID : SD10.4218**

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  
**Pedro Clemente Quinones**

Mailing Address Urb. Country Club  
 1100 Carmen Busello St.

City State Zip Code  
 San Juan PR 00924

Nature of Debt (Purpose):  
 Campaign Jingle

Outstanding Balance Beginning This Period **Transaction ID : SD10.4256**

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

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

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

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="4400.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="4400.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="4400.00"/>