

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))....	8630.00	773133.36
(b) Total Contribution Refunds (from Line 20(d))	0.00	3671.45
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	8630.00	769461.91
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	4933.40	747489.83
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	4933.40	747489.83
8. Cash on Hand at Close of Reporting Period (from Line 27).....	3883.89	
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).....	128778.25	

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).....	7500.00	510028.83
(ii) Unitemized.....	1130.00	258604.53
(iii) TOTAL of contributions from individuals ▶	8630.00	768633.36
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	4500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	8630.00	773133.36
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	2356.13
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	8630.00	775489.49

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4933.40	747489.83
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	3671.45
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	3671.45
21. OTHER DISBURSEMENTS	0.00	7521.53
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	4933.40	758682.81

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	187.29
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8630.00
25. SUBTOTAL (add Line 23 and Line 24).....	8817.29
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4933.40
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3883.89

**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 33
	<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 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : SA11AI.11069

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Juan R. Diaz Troche

Mailing Address Road 351 # 3230

City Mayaguez State PR Zip Code 00682

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

Name of Employer self employed Occupation Surgeon

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : SA11AI.11083

Amount of Each Receipt this Period
 1000.00

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : SA11AI.11084

Amount of Each Receipt this Period
 1000.00

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: PAGE 6 OF 33
(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)
Jose Gonzalez

Mailing Address **Amelia Industrial Park**
9 Claudia Street

City **Guaynabo** State **PR** Zip Code **00968**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 15 / 2013

Transaction ID : SA11AI.11067

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Ana Lopez

Mailing Address **PO Box 3146**

City **Mayaguez** State **PR** Zip Code **00681**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
12 / 30 / 2013

Transaction ID : SA11AI.11071

Amount of Each Receipt this Period
1000.00

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

Mailing Address **PO Box 368**

City **Mayaguez** State **PR** Zip Code **00681**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
12 / 30 / 2013

Transaction ID : SA11AI.11072

Amount of Each Receipt this Period
250.00

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

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

3750.00

**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 33
	<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. Miguel Lopez		Date of Receipt M M / D D / Y Y Y Y Y 12 / 30 / 2013
Mailing Address PO Box 368		Transaction ID : SA11AI.11085
City Mayaguez	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: 2016 <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. Freddie H. Roman Aviles		Date of Receipt M M / D D / Y Y Y Y Y 12 / 30 / 2013
Mailing Address 14 Peral St. N suite 1-E		Transaction ID : SA11AI.11081
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	
Receipt For: 2016 <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) C.		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	7500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 33	
	<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 10 / 01 / 2013
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 104.00 Transaction ID : SB17.11047
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Bank Merchant Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.11049
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement American Express Collection Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.11050
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Bank Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	169.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 33			
	<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 10 / 31 / 2013
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 10.00 Transaction ID : SB17.11051
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Bank Service Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 103.00 Transaction ID : SB17.11052
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Bank Merchant Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.11053
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement American Express Collection Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 33			
	<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 11 / 14 / 2013
Mailing Address P.O. Box 362708			Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.11054
City San Juan	State PR	Zip Code 00936-2708	
Purpose of Disbursement Commercial Service Bank Fee		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. Banco Popular de Puerto Rico			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address P.O. Box 362708			Amount of Each Disbursement this Period 10.00 Transaction ID : SB17.11055
City San Juan	State PR	Zip Code 00936-2708	
Purpose of Disbursement Bank Service Fee		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) c. Banco Popular de Puerto Rico			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address P.O. Box 362708			Amount of Each Disbursement this Period 0.60 Transaction ID : SB17.11056
City San Juan	State PR	Zip Code 00936-2708	
Purpose of Disbursement State Tax		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	60.60
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 11 OF 33	
	<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 11 / 29 / 2013
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 0.10 Transaction ID : SB17.11057
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Municipal Tax	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.11058
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement American Express Collection Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.11059
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Commercial Service Bank Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	65.10
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 12 OF 33			
	<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 12 / 31 / 2013
Mailing Address P.O. Box 362708			Amount of Each Disbursement this Period 10.00 Transaction ID : SB17.11060
City San Juan	State PR	Zip Code 00936-2708	
Purpose of Disbursement Bank Service Fee		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Banco Popular de Puerto Rico			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address P.O. Box 362708			Amount of Each Disbursement this Period 0.60 Transaction ID : SB17.11061
City San Juan	State PR	Zip Code 00936-2708	
Purpose of Disbursement State Tax		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Banco Popular de Puerto Rico			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address P.O. Box 362708			Amount of Each Disbursement this Period 0.10 Transaction ID : SB17.11062
City San Juan	State PR	Zip Code 00936-2708	
Purpose of Disbursement Municipal Tax		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	10.70
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 13 OF 33	
	<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 10 / 04 / 2013
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.11063
City San Juan State PR Zip Code 00917	Purpose of Disbursement Compliance and Reporting Expenses Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Secretario de Hacienda		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address PO Box 9024140		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.11065
City San Juan State PR Zip Code 00902-4140	Purpose of Disbursement Employees Income tax Retentions Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		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).....	4500.00
TOTAL This Period (last page this line number only).....	4933.40

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

Mailing Address Urb. Country Club
 1100 Carmen Busello St.

City State Zip Code
 San Juan PR 00924

Nature of Debt (Purpose):
 overpayment

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

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

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

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

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

Mailing Address Urb. Roosevelt
Canals St. #451

City State Zip Code
San Juan PR 00918

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

Outstanding Balance Beginning This Period **98.00** Transaction ID : **SD10.7470**

Amount Incurred This Period **0.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **98.00**

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

Mailing Address Tintillo Gardens
6 St. M-21

City State Zip Code
Guaynabo PR 00966

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

Outstanding Balance Beginning This Period **1500.00** Transaction ID : **SD10.7202**

Amount Incurred This Period **0.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **1500.00**

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

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 **1460.00** Transaction ID : **SD10.9862**

Amount Incurred This Period **0.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **1460.00**

1) SUBTOTALS This Period This Page (optional)	3058.00
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
Luis Calderon Navarro

Mailing Address PO Box 315

City State Zip Code
 Loiza PR 00772

Nature of Debt (Purpose):
 hotel room expense

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

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 17 OF 33
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

Outstanding Balance Beginning This Period 150.00	Transaction ID : SD10.7212	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 150.00

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

Outstanding Balance Beginning This Period 600.00	Transaction ID : SD10.7213	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 600.00

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 Guaynabo	State PR	Zip Code 00968

Outstanding Balance Beginning This Period 1200.00	Transaction ID : SD10.7214	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1200.00

1) SUBTOTALS This Period This Page (optional)	1950.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

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

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

Outstanding Balance Beginning This Period 2160.00	Transaction ID : SD10.7215	
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 Central 12		Nature of Debt (Purpose): Campaign Media and Promotion-Social Media
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406		
City Guaynabo	State PR	Zip Code 00968

Outstanding Balance Beginning This Period 2160.00	Transaction ID : SD10.7216	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2160.00

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

1) SUBTOTALS This Period This Page (optional)	6480.00
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 19 OF 33
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

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

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

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

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

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

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

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

Form/Schedule: SD10

Transaction ID : SD10.4256

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

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 33
	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 Jose Cruz		Nature of Debt (Purpose): Professional services- Media advisor
Mailing Address PO Box 443		
City Juncos	State PR	Zip Code 00777

Outstanding Balance Beginning This Period 140.00	Transaction ID : SD10.7477	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 140.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jose Cruz		Nature of Debt (Purpose): Salary
Mailing Address PO Box 443		
City Juncos	State PR	Zip Code 00777

Outstanding Balance Beginning This Period 140.00	Transaction ID : SD10.9854	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 140.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Eastern America Insurance Agency, Inc.		Nature of Debt (Purpose): Insurance
Mailing Address PO Box 193900		
City San Juan	State PR	Zip Code 00919

Outstanding Balance Beginning This Period 1227.00	Transaction ID : SD10.7490	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1227.00

1) SUBTOTALS This Period This Page (optional)	1507.00
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 22 OF 33
	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 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	Transaction ID : SD10.5774	
<input type="text" value="220.00"/>		
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="220.00"/>

B. 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	Transaction ID : SD10.7472	
<input type="text" value="140.00"/>		
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="140.00"/>

C. 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	
<input type="text" value="140.00"/>		
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="140.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="500.00"/>
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 Richard Guzman Rivera		Nature of Debt (Purpose): Field Operations Expenses-Vehicle Rental
Mailing Address 112 Paris St. Urb. Floral Park		
City	State	Zip Code
Hato Rey	PR	00917

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

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

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

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

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
Miguel Hernandez Agosto

Mailing Address Apartado 367746

City State Zip Code
San Juan PR 00936-7746

Nature of Debt (Purpose):
Salary

Outstanding Balance Beginning This Period **Transaction ID : SD10.9858**
350.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 350.00

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

Mailing Address PO Box 9777

City State Zip Code
San Juan PR 00908-0777

Nature of Debt (Purpose):
insurance premium

Outstanding Balance Beginning This Period **Transaction ID : SD10.5754**
499.10

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 499.10

C. 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):
Professional services- Assistant treasurer,
Compliance advisory

Outstanding Balance Beginning This Period **Transaction ID : SD10.7476**
175.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 175.00

1) SUBTOTALS This Period This Page (optional)	▶	1024.10
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 25 OF 33
	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 Javier J Lamboy Hernandez		Nature of Debt (Purpose): Salary
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		
City State	Zip Code	
San Juan	PR 00917	

Outstanding Balance Beginning This Period	Transaction ID : SD10.9853	
<input type="text" value="210.00"/>		
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="210.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Israel Morales Alicea		Nature of Debt (Purpose): Salary
Mailing Address Terranova 4B9 St.		
City State	Zip Code	
Guaynabo	PR 00969	

Outstanding Balance Beginning This Period	Transaction ID : SD10.9860	
<input type="text" value="140.00"/>		
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="140.00"/>

C. 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"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="457.03"/>
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

Ernesto Morales Ramos

Nature of Debt (Purpose):

Professional services- Media Advisor

Mailing Address 2 Cond. San Francisco
VLG Apt. 109

City State Zip Code
Carolina PR 00987-6950

Outstanding Balance Beginning This Period

385.50

Transaction ID : SD10.7475

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

385.50

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

Ernesto Morales Ramos

Nature of Debt (Purpose):

Salary

Mailing Address 2 Cond. San Francisco
VLG Apt. 109

City State Zip Code
Carolina PR 00987-6950

Outstanding Balance Beginning This Period

228.00

Transaction ID : SD10.9856

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

228.00

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

Ivonne Otero Santiago

Nature of Debt (Purpose):

Salary

Mailing Address Calle 2 #77 Urb. Paseo Alto

City State Zip Code
San Juan PR 00926

Outstanding Balance Beginning This Period

140.00

Transaction ID : SD10.9859

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

140.00

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

753.50

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 27 OF 33
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Partido Popular Democratico Inc.

Mailing Address 403 Constitucion Ave.

City State Zip Code
 San Juan PR 00906

Nature of Debt (Purpose):
 Office Rent

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

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

Mailing Address 362 Avenida de la Constitucion

City State Zip Code
 San Juan PR 00901

Nature of Debt (Purpose):
 equipment and postage meter rental

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

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

Mailing Address 1406 Magdalena Ave.

City State Zip Code
 San Juan PR 00907

Nature of Debt (Purpose):
 Fundraising Expenses

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ricoh PR		Nature of Debt (Purpose): copy machine
Mailing Address National Plaza Bldg suite 1700 431 Ponce de Leon Ave.		
City State	Zip Code	
San Juan	PR 00917	

Outstanding Balance Beginning This Period	Transaction ID : SD10.4971	
<input type="text" value="312.54"/>		
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="312.54"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ricoh PR		Nature of Debt (Purpose): Office expenses-Printing services
Mailing Address National Plaza Bldg suite 1700 431 Ponce de Leon Ave.		
City State	Zip Code	
San Juan	PR 00917	

Outstanding Balance Beginning This Period	Transaction ID : SD10.7204	
<input type="text" value="305.00"/>		
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="305.00"/>

C. 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	Transaction ID : SD10.7196	
<input type="text" value="3250.00"/>		
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="3250.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="3867.54"/>
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 29 OF 33
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

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

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

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

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 30 OF 33
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

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

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

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

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 31 OF 33
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

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

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

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

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 32 OF 33
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

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

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

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

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

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

City State Zip Code
Dorado PR 00646-2055

Nature of Debt (Purpose):
Vehicle Rentals

Outstanding Balance Beginning This Period **Transaction ID : SD10.10934**
21862.79

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 21862.79

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

Mailing Address Isla Verde

City State Zip Code
Carolina PR 00979

Nature of Debt (Purpose):
Campaign vehicles rental.

Outstanding Balance Beginning This Period **Transaction ID : SD10.7201**
1803.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 1803.00

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

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

1) SUBTOTALS This Period This Page (optional)	23665.79
2) TOTALS This Period (last page this line number only)	128778.25
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) ▶	128778.25