

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 403 AVENIDA CONSTITUCION SAN JUAN PR 00906

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00506212 3. IS THIS REPORT NEW (N) OR AMENDED (A) PR 00

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

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

5. Covering Period MM/DD/YYYY 04/01/2012 through MM/DD/YYYY 06/30/2012

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

Type or Print Name of Treasurer Jaime Luis Sanabria Montanez Signature of Treasurer Jaime Luis Sanabria Montanez [Electronically Filed] Date MM/DD/YYYY 07/14/2012

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

Table with 8 columns and 1 row for Office Use Only. Includes FEC FORM 3 (Revised 02/2003) label.

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))....	137252.07	316386.11
(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)).....	137252.07	316386.11
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	128430.78	268921.33
(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)).....	128430.78	268921.33
8. Cash on Hand at Close of Reporting Period (from Line 27).....	43286.70	
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).....	82173.64	

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)

PAGE 3 / 150

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).....	72642.07	212247.80
(ii) Unitemized.....	62110.00	100638.31
(iii) TOTAL of contributions from individuals ▶	134752.07	312886.11
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	3500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	137252.07	316386.11
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.).....	2100.00	2100.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	139352.07	318486.11

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	128430.78	268921.33
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	4590.12	6278.08
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	133020.90	275199.41

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	36955.53
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	139352.07
25. SUBTOTAL (add Line 23 and Line 24).....	176307.60
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	133020.90
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	43286.70

**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 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Lilliam Acevedo Torres

Mailing Address Cond. Sanctus Spiritus Apt. 101

City San Juan State PR Zip Code 00926

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

Name of Employer unemployed Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **335.13**

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

Transaction ID : SA11AI.5973

Amount of Each Receipt this Period
 150.00

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

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

City San Juan State PR Zip Code 00918

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

Name of Employer Mc Connell & Valdes Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2012

Transaction ID : SA11AI.6079

Amount of Each Receipt this Period
 250.00

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

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

City San Juan State PR Zip Code 00918

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

Name of Employer Mc Connell & Valdes Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012

Transaction ID : SA11AI.6738

Amount of Each Receipt this Period
 100.00

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

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

500.00

**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 6 OF 150
	<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)
Arturo Agosto

Mailing Address **PO Box 1133**

City **Manati** State **PR** Zip Code **00674**

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

Name of Employer **self employed** Occupation **Attorney**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 17 / 2012

Transaction ID : SA11AI.6219

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Eugenio M. Alonso

Mailing Address **Urb. Baldrich
202 Tous Soto St.**

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

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

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 01 / 2012

Transaction ID : SA11AI.6801

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Jose B. Andreu Garcia

Mailing Address **Paseo de la Fuente D-3
Calle Tiboli**

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

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

Name of Employer **Jose Andreu Inc.** Occupation **Engineer**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 29 / 2012

Transaction ID : SA11AI.7226

Amount of Each Receipt this Period
500.00

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

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

1800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Edgardo Aponte		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 29 / 2012
Mailing Address Cond. Jardin 3 #426 Calle Verbena		Transaction ID : SA11AI.6786
City Toa Alta	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 Doctor	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Jorge L. Aquino Munoz		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 11 / 2012
Mailing Address Box 1426		Transaction ID : SA11AI.6918
City Lares	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Lawyer	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Angel M. Avila De Jesus		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 17 / 2012
Mailing Address Hacienda San Jose 270 Via Cundeamor		Transaction ID : SA11AI.6088
City Caguas	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Insurance Broker	Occupation Carrion, Lafitte y Casellas	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 550.00	

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 150
	<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)
Frederick Baraga Huyke

Mailing Address Cond. La Coruna
2023 Carr 177 Este Apt. 2203

City Guaynabo State PR Zip Code 00969

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

Name of Employer Occupation
Martinez, Odel & Caladia Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 17 / 2012

Transaction ID : SA11AI.6052

Amount of Each Receipt this Period
250.00

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

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

City San Juan State PR Zip Code 00918

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

Name of Employer Occupation
unemployed Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 12 / 2012

Transaction ID : SA11AI.6385

Amount of Each Receipt this Period
500.00

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

Mailing Address Calle 5 de octubre # 9

City Santa Isabel State PR Zip Code 00757

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

Name of Employer Occupation
Self-Employed Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 27 / 2012

Transaction ID : SA11AI.6507

Amount of Each Receipt this Period
100.00

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

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

850.00

**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 9 OF 150
	<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)
Rebecca M. Berrios Valines

Mailing Address PO Box 79788

City State Zip Code
Carolina PR 00984

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

Name of Employer Occupation
Bayamon Community College Professor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 14 / 2012

Transaction ID : SA11AI.5807

Amount of Each Receipt this Period
650.00

B. Full Name (Last, First, Middle Initial)
Francisco G. Bruno Rovira

Mailing Address Urb. Torrimar
J-5 Ridgewood

City State Zip Code
Guaynabo PR 00966

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

Name of Employer Occupation
Mc Connel & Valdes Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 17 / 2012

Transaction ID : SA11AI.6089

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Francisco G. Bruno Rovira

Mailing Address Urb. Torrimar
J-5 Ridgewood

City State Zip Code
Guaynabo PR 00966

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

Name of Employer Occupation
Mc Connel & Valdes Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 17 / 2012

Transaction ID : SA11AI.6514

Amount of Each Receipt this Period
250.00

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

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

1150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Manuel Calero		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 14 / 2012
Mailing Address Box 801		Transaction ID : SA11AI.7235
City Rio Blanco	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 Farmer	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. Jorge Carbonell		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 03 / 2012
Mailing Address 605 Mississippi St.		Transaction ID : SA11AI.6225
City San Francisco	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Carbonell Architecture & Int.	Occupation Architect	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Ruben Carbonell Fernandez		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 05 / 2012
Mailing Address Calle Sol 350 Apt. 2		Transaction ID : SA11AI.6771
City Old San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Unemployed	Occupation Retired	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 150
	<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)
Olga R. Cardona Hernandez

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

City Carolina State PR Zip Code 00979-4958

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11AI.6575

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Olga R. Cardona Hernandez

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

City Carolina State PR Zip Code 00979-4958

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 18 / 2012

Transaction ID : SA11AI.6318

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Antonio Casellas Fernandez

Mailing Address Estancias de Torrimar
65 Caoba St.

City Guaynabo State PR Zip Code 00966

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

Name of Employer Occupation
self employed Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 21 / 2012

Transaction ID : SA11AI.6732

Amount of Each Receipt this Period
300.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 150
	<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)
Salvador Casellas Toro

Mailing Address **PO Box 364225**

City **San Juan** State **PR** Zip Code **00936**

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

Name of Employer **Mc Connell & Valdes** Occupation **Attorney**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 16 / 2012

Transaction ID : SA11AI.6037

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Samuel T. Cespedes

Mailing Address **Urb. Garden Hills
MA-5 Miramontes St.**

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

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

Name of Employer **Mc Conell & Valdes** Occupation **Attorney**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 17 / 2012

Transaction ID : SA11AI.6038

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Samuel T. Cespedes

Mailing Address **Urb. Garden Hills
MA-5 Miramontes St.**

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

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

Name of Employer **Mc Conell & Valdes** Occupation **Attorney**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 17 / 2012

Transaction ID : SA11AI.6098

Amount of Each Receipt this Period
100.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Samuel T. Cespedes		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 18 / 2012
Mailing Address Urb. Garden Hills MA-5 Miramontes St.		Transaction ID : SA11AI.6508
City Guaynabo	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Mc Conell & Valdes	Occupation Attorney	Amount of Each Receipt this Period 660.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) B. Samuel T. Cespedes		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 21 / 2012
Mailing Address Urb. Garden Hills MA-5 Miramontes St.		Transaction ID : SA11AI.6509
City Guaynabo	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Mc Conell & Valdes	Occupation Attorney	Amount of Each Receipt this Period 760.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C. Hiram C. Chevere Amundaray		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 08 / 2012
Mailing Address Cond. Alto Monte, Apt. 1004		Transaction ID : SA11AI.6858
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Senior Mortgage Bankers, Inc.	Occupation Executive	Amount of Each Receipt this Period 250.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	410.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Carlos M. Chevere Mourino

Mailing Address Urb. Paseos San Juan
Ave. Las Palomas G-1

City San Juan State PR Zip Code 00926

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

Name of Employer Self-Employed Occupation Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11AI.6860

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Francisco Chevere Mourino

Mailing Address P.O. Box 364225

City San Juan State PR Zip Code 00936

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

Name of Employer Mc Connell & Valdes Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2012

Transaction ID : SA11AI.6091

Amount of Each Receipt this Period
250.00

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

Mailing Address P.O. Box 364225

City San Juan State PR Zip Code 00936

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

Name of Employer Mc Connell & Valdes Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2012

Transaction ID : SA11AI.6862

Amount of Each Receipt this Period
100.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 150
	<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)
Maria G. Chevere Mourino

Mailing Address Urb. San Patricio
Calle Cerezo #5

City Guaynabo State PR Zip Code 00968

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

Name of Employer Self-Employed Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

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

Transaction ID : SA11AI.6868

Amount of Each Receipt this Period
550.00

B. Full Name (Last, First, Middle Initial)
Maria G. Chevere Mourino

Mailing Address Urb. San Patricio
Calle Cerezo #5

City Guaynabo State PR Zip Code 00968

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

Name of Employer Self-Employed Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1226.33

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

Transaction ID : SA11AI.6872

Amount of Each Receipt this Period
676.33

In-kind - Meals and beverages expense for fundraising activity.

C. Full Name (Last, First, Middle Initial)
Sergio L. Chevere Mourino

Mailing Address Urb. El Monte
3166 Marbella St.

City Ponce State PR Zip Code 00716-4808

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

Name of Employer Primary Medical Group 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
 05 / 17 / 2012

Transaction ID : SA11AI.6094

Amount of Each Receipt this Period
250.00

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

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

1476.33

**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 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Sergio L. Chevere Mourino		Date of Receipt M M / D D / Y Y Y Y 06 / 08 / 2012	
Mailing Address Urb. El Monte 3166 Marbella St. City Ponce State PR Zip Code 00716-4808		Transaction ID : SA11AI.6865	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Primary Medical Group Occupation Physician			
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1250.00	

Full Name (Last, First, Middle Initial) B. Ingrid C. Coldberg Rodriguez		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2012	
Mailing Address Cond. El Monte Norte Apt. 626 City San Juan State PR Zip Code 00918		Transaction ID : SA11AI.6051	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer self employed Occupation Attorney			
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) C. Jose R. Coleman Tio		Date of Receipt M M / D D / Y Y Y Y 05 / 14 / 2012	
Mailing Address 164 Kirkland House ML CTR City Cambridge State MA Zip Code 02138		Transaction ID : SA11AI.6197	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Crawath, Swaine & Moore LLP Occupation Lawyer			
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00	

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

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

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

FOR LINE NUMBER: PAGE 17 OF 150
(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)
Isabel Cortina

Mailing Address PO Box 10666

City San Juan State PR Zip Code 00922

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

Name of Employer unemployed Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2012

Transaction ID : SA11AI.6794

Amount of Each Receipt this Period
2300.00

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

Mailing Address PMB 356
138 Winston Churchill Ave.

City San Juan State PR Zip Code 00926-6013

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

Name of Employer self employed Occupation Administrator

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2012

Transaction ID : SA11AI.6403

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Rafael A. Cox Rosario

Mailing Address P.O. Box 366676

City San Juan State PR Zip Code 00936-6676

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

Name of Employer U.P.R School of Medicine Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3861.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2012

Transaction ID : SA11AI.7191

Amount of Each Receipt this Period
1361.00

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

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

3861.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 150
	<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)
Maria Cristina Mena

Mailing Address J-33 Bilbao St.

City Guaynabo State PR Zip Code 00969-4613

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

Name of Employer Mc Connell & Valdes Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 09 / 2012

Transaction ID : SA11AI.6071

Amount of Each Receipt this Period
250.00

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

Mailing Address P.O. Box 3418

City Bayamon State PR Zip Code 00958

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

Name of Employer Self-Employed Occupation Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 04 / 2012

Transaction ID : SA11AI.6029

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Nylmer Cruz Pagan

Mailing Address P.O. Box 6798

City San Juan State PR Zip Code 00914

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

Name of Employer Jhonson & Jhonson Occupation Marketing

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2012

Transaction ID : SA11AI.7026

Amount of Each Receipt this Period
2500.00

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

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

2850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 150
	<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)
Milagros Cuevas Torres

Mailing Address Urb. Royel Palm IA #13
Calle Azalea

City Bayamon State PR Zip Code 00956-3117

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

Name of Employer Self-Employed Occupation Businesswoman

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
 06 / 07 / 2012

Transaction ID : SA11AI.6863

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Jose Ramon Cumba

Mailing Address PO Box 130

City Bayamon State PR Zip Code 00960

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

Name of Employer self employed Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2012

Transaction ID : SA11AI.6796

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Gladys De Hestres

Mailing Address PO Box 9021024

City San Juan State PR Zip Code 00902-1024

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

Name of Employer unemployed Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1075.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2012

Transaction ID : SA11AI.5904

Amount of Each Receipt this Period
75.00

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

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

1325.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Raul Delgado		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 08 / 2012
Mailing Address PO Box 10260		Transaction ID : SA11AI.6308
City San Juan	State PR	
Zip Code 00908-1260		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self employed	Occupation Accountant - CPA	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Teresa Denton		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 11 / 2012
Mailing Address Marbella 61		Transaction ID : SA11AI.6369
City San Juan	State PR	
Zip Code 00911		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer unemployed	Occupation Retired	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Grishelda Diaz Colon		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 03 / 2012
Mailing Address Urb. Garden Hills MA-1 Ramirez de Arrellano Ave.		Transaction ID : SA11AI.5983
City Guaynabo	State PR	
Zip Code 00966		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer unemployed	Occupation Homemaker	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

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

Mailing Address Urb. Garden Hills
MA-1 Ramirez de Arrellano Ave.

City Guaynabo State PR Zip Code 00966

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

Name of Employer self employed Occupation Events Promoter

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
05 / 03 / 2012

Transaction ID : SA11AI.5985

Amount of Each Receipt this Period
500.00

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

Mailing Address Estancias de Torrimar
2 Orquidea St.

City Guaynabo State PR Zip Code 00966-3163

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

Name of Employer Interplan/Arquitect Occupation Vice-President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 21 / 2012

Transaction ID : SA11AI.6580

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Rafael Durand Pla

Mailing Address Urb. La Villa de Torrimar
128 Calle Reina Margarita

City Guaynabo State PR Zip Code 00969-3275

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

Name of Employer RDP Management Corp. Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 21 / 2012

Transaction ID : SA11AI.7192

Amount of Each Receipt this Period
250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 150
	<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)
Mikel J. Eguia

Mailing Address Urb. Villa Caparra
Calle A # 37

City Guaynabo State PR Zip Code 00966

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

Name of Employer Sunrise Securities Corp. Occupation Banker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11AI.5855

Amount of Each Receipt this Period
425.00

B. Full Name (Last, First, Middle Initial)
Jorge Fernandez Pabon

Mailing Address Calle Washington #20
Apt. PH-C

City San Juan State PR Zip Code 00936

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

Name of Employer Unemployed Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012

Transaction ID : SA11AI.6718

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Luis Freyre Melendez

Mailing Address Washington St. # 2 Apt. 1202

City San Juan State PR Zip Code 00907

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

Name of Employer unemployed Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2012

Transaction ID : SA11AI.6346

Amount of Each Receipt this Period
1000.00

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

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

1725.00

**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 23 OF 150
	<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)
Cecilia I. Fuentes de Andreu

Mailing Address **Parque de las Fuentes**
Apt. 108

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

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

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 21 / 2012

Transaction ID : SA11AI.6678

Amount of Each Receipt this Period
500.00

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

Mailing Address **PO Box 362370**

City **San Juan** State **PR** Zip Code **00936**

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

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

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
05 / 24 / 2012

Transaction ID : SA11AI.7222

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Maria Matilde Garcia

Mailing Address **Sol Street 350 Apt. 2**

City **Old San Juan** State **PR** Zip Code **00901**

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
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 05 / 2012

Transaction ID : SA11AI.6776

Amount of Each Receipt this Period
2500.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 150
	<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. Maria Garcia Benitez		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2012
Mailing Address Urb. Torrimar 0-37 Ridgewood		Transaction ID : SA11AI.7224
City Guaynabo	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer Unemployed	Occupation Homemaker	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00	

Full Name (Last, First, Middle Initial) B. Jose Garcia Noya		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 06 / 2012
Mailing Address PO Box 9021666		Transaction ID : SA11AI.6856
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 Lawyer	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C. Jose Danilo Gonzalez		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2012
Mailing Address Urb. Paraiso de Coamo 807 Serenidad Street		Transaction ID : SA11AI.7423
City Coamo	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 260.00
Name of Employer AEE	Occupation Engineer	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 260.00	

SUBTOTAL of Receipts This Page (optional).....	2510.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 150		
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Ana L. Gonzalez Cabrera

Mailing Address Urb. Pla
28 Jimenez Garcia St.

City Caguas State PR Zip Code 00725

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

Name of Employer self employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 19 / 2012

Transaction ID : SA11AI.5799

Amount of Each Receipt this Period
250.00

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

Mailing Address Mansiones de Villanova
C St. E1-20

City San Juan State PR Zip Code 00926-6432

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
05 / 21 / 2012

Transaction ID : SA11AI.6519

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Agneris Guzman de Duran

Mailing Address 1408 Feria Court PH 2

City San Juan State PR Zip Code 00909

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

Name of Employer Unemployed Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 25 / 2012

Transaction ID : SA11AI.6908

Amount of Each Receipt this Period
400.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Federico R. Hernandez		Date of Receipt M M / D D / Y Y Y Y 04 / 29 / 2012	
Mailing Address 10 E 29th, Apt. 11 K		Transaction ID : SA11AI.5853	
City New York	State NY	Zip Code 10016-7431	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00	
Name of Employer UBS	Occupation Businessman		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) B. Alba J. Iglesias		Date of Receipt M M / D D / Y Y Y Y 05 / 23 / 2012	
Mailing Address PO Box 953		Transaction ID : SA11AI.6568	
City Morovis	State PR	Zip Code 00687	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Consultorio Medico Dr. Rios	Occupation Administrator		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. Margarita Irizarry Ramirez		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2012	
Mailing Address Urb. Baldrich 216 Manuel Rossy St.		Transaction ID : SA11AI.6081	
City San Juan	State PR	Zip Code 00918	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer University of Puerto Rico	Occupation Professor		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 150
	<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)
Margarita Irizarry Ramirez

Mailing Address Urb. Baldrich
216 Manuel Rossy St.

City San Juan State PR Zip Code 00918

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

Name of Employer University of Puerto Rico Occupation Professor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2012

Transaction ID : SA11AI.6795

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Sandra Jimenez Robles

Mailing Address PO Box 19-1477

City San Juan State PR Zip Code 00919-1477

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2012

Transaction ID : SA11AI.6780

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Carlos M. Lamoute Navas

Mailing Address PO Box 9022185

City San Juan State PR Zip Code 00902

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

Name of Employer Mc Connell & Valdes Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2012

Transaction ID : SA11AI.6084

Amount of Each Receipt this Period
250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 150
	<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)
Salomon Levis Goldstein

Mailing Address Urb. San Patricio
Calle Cerezo #5

City Guaynabo State PR Zip Code 00968

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

Name of Employer Self-Employed Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

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

Transaction ID : SA11AI.6866

Amount of Each Receipt this Period
850.00

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

Mailing Address P.O. Box 6676

City Caguas State PR Zip Code 00726

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

Name of Employer Instructor Occupation Huertas College

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
 05 / 23 / 2012

Transaction ID : SA11AI.6633

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Ariel Marrero Otero

Mailing Address RR 3 #4580

City San Juan State PR Zip Code 00926

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

Name of Employer Empresas Diaz Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2012

Transaction ID : SA11AI.7014

Amount of Each Receipt this Period
250.00

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

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

1225.00

**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 29 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Ernesto Mayoral Megwinoff		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address Paseo Las Vistas 78 St. 3 City San Juan State PR Zip Code 00926		Transaction ID : SA11Al.6056
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Mc Connell & Valdes	Occupation Attorney	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Victor Luis Mena Rivera		Date of Receipt M M / D D / Y Y Y Y 06 / 05 / 2012
Mailing Address Caparra Hills Calle Bucare H-11 City Guaynabo State PR Zip Code 00968		Transaction ID : SA11Al.6773
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Baker	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C. Victor Luis Mena Rivera		Date of Receipt M M / D D / Y Y Y Y 06 / 21 / 2012
Mailing Address Caparra Hills Calle Bucare H-11 City Guaynabo State PR Zip Code 00968		Transaction ID : SA11Al.6652
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self-Employed	Occupation Baker	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1300.00	

SUBTOTAL of Receipts This Page (optional).....	1550.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

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

FOR LINE NUMBER: PAGE 30 OF 150
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 11e 15

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Juan C. Mendez Torres

Mailing Address Urb. Montehiedra
62 Falcon St.

City San Juan State PR Zip Code 00926

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

Name of Employer Mc Connell & Valdes Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2012

Transaction ID : SA11AI.6075

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Jose L. Mendoza Billoch

Mailing Address PO Box 190476

City San Juan State PR Zip Code 00919-0476

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

Name of Employer self employed Occupation Accountant - CPA

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
 05 / 02 / 2012

Transaction ID : SA11AI.6063

Amount of Each Receipt this Period
250.00

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

Mailing Address Parque Loyola 1505

City Hato Rey State PR Zip Code 00918

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

Name of Employer Self-Employed Occupation Businessman

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012

Transaction ID : SA11AI.6685

Amount of Each Receipt this Period
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Rafael Moreno Hernandez

Mailing Address Urb. Prado Alto
H-8 St. 1

City State Zip Code
Guaynabo PR 00969

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

Name of Employer Occupation
Dueno Showtime Billboards Salesman

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 03 / 2012

Transaction ID : SA11AI.5981

Amount of Each Receipt this Period
500.00

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

Mailing Address PO Box 360486

City State Zip Code
San Juan PR 00936-0486

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

Name of Employer Occupation
Self-Employed Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2012

Transaction ID : SA11AI.6812

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Rafael Ojeda Diez

Mailing Address PO Box 9023392

City State Zip Code
San Juan PR 00902-3392

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

Name of Employer Occupation
Ojeda & Ojeda Law Office Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 17 / 2012

Transaction ID : SA11AI.6054

Amount of Each Receipt this Period
250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 150
	<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)
Mario Oronoz

Mailing Address **Torrimar Alto Bamboo K4**

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

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

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **913.93**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 21 / 2012

Transaction ID : SA11AI.6760

Amount of Each Receipt this Period
913.93

In-kind - Meals and beverages expense for fundraising activity

B. Full Name (Last, First, Middle Initial)
Jose A. Padilla Ortiz

Mailing Address **PO Box 10666**

City **San Juan** State **PR** Zip Code **00922**

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

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 29 / 2012

Transaction ID : SA11AI.6792

Amount of Each Receipt this Period
2300.00

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

Mailing Address **Barcelo 68-B St.**

City **Barranquitas** State **PR** Zip Code **00794**

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

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 29 / 2012

Transaction ID : SA11AI.6782

Amount of Each Receipt this Period
250.00

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

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

3463.93

**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 33 OF 150
	<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)
Heriberto Pagan Saez

Mailing Address Urb. Sagrado Corazon
San Julian St # 1619

City San Juan State PR Zip Code 00926

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

Name of Employer self employed Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012

Transaction ID : SA11AI.6641

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mario L. Paniagua Guzman

Mailing Address 2 Washington St. Apt. 603

City San Juan State PR Zip Code 00907-1579

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

Name of Employer Mc Connell & Valdes Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2012

Transaction ID : SA11AI.6067

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Francisco J. Pavia Sanchez

Mailing Address Parques de San Ignacio
A-46 St. 1

City San Juan State PR Zip Code 00921

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

Name of Employer Mc Conell & Valdes Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2012

Transaction ID : SA11AI.6040

Amount of Each Receipt this Period
500.00

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

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

950.00

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

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

FOR LINE NUMBER: PAGE 34 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Luis M. Pavia Vidal

Mailing Address Urb. Villas del Pilar
A-7 Quebrada Arena St.

City San Juan, State PR Zip Code 00926

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

Name of Employer self-employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2012

Transaction ID : SA11AI.6050

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Jose M. Perez Cardona

Mailing Address PO Box 36

City Moca, State PR Zip Code 00676

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

Name of Employer Self-Employed Occupation Doctor

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
 04 / 29 / 2012

Transaction ID : SA11AI.7189

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Orlando J. Perez Rodriguez

Mailing Address Villas de Parana
S8-15 Street 8

City San Juan, State PR Zip Code 00926

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

Name of Employer UBS Occupation Consultant

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
 06 / 21 / 2012

Transaction ID : SA11AI.6752

Amount of Each Receipt this Period
200.00

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

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

700.00

**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 35 OF 150
	<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) Zaida Perez Roman		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 10 / 2012
Mailing Address Cond. Parque de Loyola - Torre Sur 500 Jesus T. Pinero Ave Apt. 1003		Transaction ID : SA11AI.6065
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Carlos Polo		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 28 / 2012
Mailing Address PO Box 1954554		Transaction ID : SA11AI.7004
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 Polo & Polo LLC	Occupation Lawyer	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) Antonio J. Ramirez Aponnte		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 17 / 2012
Mailing Address Hacienda San Jose 345 Via Canaveral		Transaction ID : SA11AI.6086
City Caguas	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Mc Conell & Valdes	Occupation Attorney	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 150
	<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)
Elliot R. Ramirez Perez

Mailing Address Urb. Monte Claro
MK-38 Plaza 40

City Bayamon State PR Zip Code 00961

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

Name of Employer ERC Group Occupation Publicist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.74

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 23 / 2012

Transaction ID : SA11AI.6765

Amount of Each Receipt this Period
1240.74

In-kind - Meals and beverages expense for fundraising activity

B. Full Name (Last, First, Middle Initial)
Frank Ramos

Mailing Address PMB 1265 PO Box 4956

City Caguas State PR Zip Code 00725

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

Name of Employer Self-Employed Occupation Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 23 / 2012

Transaction ID : SA11AI.6621

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Jeannette Ramos

Mailing Address PO Box 191875

City San Juan State PR Zip Code 00919

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

Name of Employer Self-Employed Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012

Transaction ID : SA11AI.6691

Amount of Each Receipt this Period
300.00

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

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

1790.74

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 150
	<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)
Ivette Ramos Buonomo

Mailing Address Calle Paris 129-D

City San Juan State PR Zip Code 00917-3531

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

Name of Employer Retired Occupation Lawyer

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
 06 / 28 / 2012

Transaction ID : SA11AI.6790

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Carlos R. Rios Gautier

Mailing Address 27 Gonzalez Giusti Ave. Suite 300

City Guaynabo State PR Zip Code 00968

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

Name of Employer Rios, Gautier & Cesteros CSP Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2012

Transaction ID : SA11AI.6058

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Carlos R. Rios Gautier

Mailing Address 27 Gonzalez Giusti Ave. Suite 300

City Guaynabo State PR Zip Code 00968

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

Name of Employer Rios, Gautier & Cesteros CSP Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012

Transaction ID : SA11AI.6701

Amount of Each Receipt this Period
200.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 150
	<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)
Victoria Rios Ramos

Mailing Address Urb. Baldrich
Manuel Rossi St.

City Hato Rey State PR Zip Code 00918

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

Name of Employer self employed Occupation Accountant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2012

Transaction ID : SA11AI.6360

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Elsa Rive Power

Mailing Address 1153 Magdalena Ave.

City San Juan State PR Zip Code 00907-1710

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

Name of Employer Freelance Occupation Publicist

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
 05 / 14 / 2012

Transaction ID : SA11AI.6061

Amount of Each Receipt this Period
250.00

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

Mailing Address Garden Hills Plaza
PMB 405 1353 Ave. Luis Vigoreaux

City Guaynabo State PR Zip Code 00966

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

Name of Employer JH The Home Work Occupation Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2012

Transaction ID : SA11AI.6806

Amount of Each Receipt this Period
250.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 150
	<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)
Mae Rivera Janer

Mailing Address 554 Perseo St. Apt 1101

City San Juan State PR Zip Code 00920

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

Name of Employer unemployed Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2012

Transaction ID : SA11AI.5907

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
Mae Rivera Janer

Mailing Address 554 Perseo St. Apt 1101

City San Juan State PR Zip Code 00920

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

Name of Employer unemployed Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **475.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012

Transaction ID : SA11AI.6748

Amount of Each Receipt this Period
100.00

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

Mailing Address Garden Hills Plaza
PMB 405 Carr. 19 #1353

City Guaynabo State PR Zip Code 00966

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

Name of Employer Self-Employed Occupation Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2012

Transaction ID : SA11AI.6870

Amount of Each Receipt this Period
250.00

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

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

425.00

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

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

FOR LINE NUMBER: PAGE 40 OF 150
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
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 **300.00**

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 09 / 2012

Transaction ID : SA11AI.6591

Amount of Each Receipt this Period
50.00

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

Mailing Address PO Box 845

City Barranquitas State PR Zip Code 00794

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

Name of Employer Magdaly Ice Service Occupation Businessman

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
06 / 29 / 2012

Transaction ID : SA11AI.6788

Amount of Each Receipt this Period
250.00

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

Mailing Address Urb. Estancias San Fernando Calle 4 B-30

City Carolina State PR Zip Code 00985

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

Name of Employer Clinica Borinquen Occupation Manager

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
06 / 28 / 2012

Transaction ID : SA11AI.6799

Amount of Each Receipt this Period
2500.00

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

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

2800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

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

Mailing Address Apartado 41044

City San Juan State PR Zip Code 00940-1044

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

Name of Employer self employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2012

Transaction ID : SA11AI.5979

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Benjamin Rodriguez Cotto

Mailing Address PMB 62 PO Box 70344

City San Juan State PR Zip Code 00936

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

Name of Employer Centro Medico Occupation Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2012

Transaction ID : SA11AI.6774

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
Dolores Rodriguez d Oronoz

Mailing Address Torrimar Alto, Bamboo K4

City Guaynabo State PR Zip Code 00966

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

Name of Employer Self-Employed Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012

Transaction ID : SA11AI.6763

Amount of Each Receipt this Period
 913.93

In-kind - Meals and beverages expense for fundraising activity

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

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

4413.93

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 150
	<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)
Mario Rodriguez Pijuan

Mailing Address 1302 Calle Luchetti Apt. 5W

City San Juan	State PR	Zip Code 00907
------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Lawyer
-----------------------------	----------------------

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
 06 / 21 / 2012

Transaction ID : SA11AI.6739

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Manuel Rodriguez Rios

Mailing Address PO Box 953

City Morovis	State PR	Zip Code 00687
-----------------	-------------	-------------------

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
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 23 / 2012

Transaction ID : SA11AI.6566

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Edgardo Rosario Burgos

Mailing Address Urb. Estancias San Fernando
Calle 4 B-30

City Carolina	State PR	Zip Code 00985
------------------	-------------	-------------------

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

Name of Employer Clinica Borinquen	Occupation Doctor
---------------------------------------	----------------------

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
 06 / 28 / 2012

Transaction ID : SA11AI.6797

Amount of Each Receipt this Period
2500.00

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

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

3300.00

**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 43 OF 150
	<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) Angel Luis Rosas		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 22 / 2012
Mailing Address P.O. Box 470		Transaction ID : SA11AI.6537
City Mayaguez	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Retire	Occupation Retire	Election Cycle-to-Date 240.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Angel Luis Rosas		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 03 / 2012
Mailing Address P.O. Box 470		Transaction ID : SA11AI.5987
City Mayaguez	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retire	Occupation Retire	Election Cycle-to-Date 740.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Salvador Rovira Rodriguez		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 18 / 2012
Mailing Address PO Box 800970		Transaction ID : SA11AI.6334
City Coto Laurel	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Rovira Luna Group	Occupation President	Election Cycle-to-Date 1000.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	1540.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Marielena Ruiz		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 16 / 2012	
Mailing Address Urb. San Ignacio 1719 San Etanislao St.		Transaction ID : SA11AI.6069	
City San Juan State PR Zip Code 00927	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Name of Employer unemployed Occupation Homemaker		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. Maria L. Santaella Arguinzoni		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 14 / 2012	
Mailing Address PO Box 366676		Transaction ID : SA11AI.6227	
City San Juan State PR Zip Code 00936	Amount of Each Receipt this Period 271.77 In-kind - File Cabinet		
FEC ID number of contributing federal political committee. C	Name of Employer unemployed Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2480.28		

Full Name (Last, First, Middle Initial) C. Maria L. Santaella Arguinzoni		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 03 / 2012	
Mailing Address PO Box 366676		Transaction ID : SA11AI.6925	
City San Juan State PR Zip Code 00936	Amount of Each Receipt this Period 18.29 In-kind - Office Materials, Box and Binder.		
FEC ID number of contributing federal political committee. C	Name of Employer unemployed Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2498.57		

SUBTOTAL of Receipts This Page (optional).....	540.06
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 150
	<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)
Maria L. Santaella Arguinzoni

Mailing Address PO Box 366676

City San Juan State PR Zip Code 00936

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

Name of Employer unemployed Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2558.57

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 05 / 2012

Transaction ID : SA11AI.6924

Amount of Each Receipt this Period
60.00
 In-kind - Office Materials, cards.

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

Mailing Address PO Box 366676

City San Juan State PR Zip Code 00936

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

Name of Employer unemployed Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2634.65

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 07 / 2012

Transaction ID : SA11AI.6926

Amount of Each Receipt this Period
32.10
 In-kind - Office Materials

C. Full Name (Last, First, Middle Initial)
Maria L. Santaella Arguinzoni

Mailing Address PO Box 366676

City San Juan State PR Zip Code 00936

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

Name of Employer unemployed Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2602.55

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 07 / 2012

Transaction ID : SA11AI.6927

Amount of Each Receipt this Period
43.98
 In-kind - Office Materials

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

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

136.08

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

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

Mailing Address **PO Box 8582**

City **Humacao** State **PR** Zip Code **00792**

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

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 02 / 2012

Transaction ID : SA11AI.6922

Amount of Each Receipt this Period
600.00

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

Mailing Address **Urb. Sabanera del Dorado**
394 Camino del Conti

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

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

Name of Employer **self employed** Occupation **Attorney**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

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

Transaction ID : SA11AI.6212

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
Jhoanna Santiago Girona

Mailing Address **Urb. El Senorial**
2046 A Ganivet St.

City **San Juan** State **PR** Zip Code **00926-6930**

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

Name of Employer **Affordable Housing Consultant** Occupation **Attorney**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 17 / 2012

Transaction ID : SA11AI.6059

Amount of Each Receipt this Period
250.00

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

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

2350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 150
	<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. Elsa Tio		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 12 / 2012	
Mailing Address PO Box 9023912		Transaction ID : SA11AI.6400	
City San Juan	State PR	Zip Code 00902-3912	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00	
Name of Employer Unemployed	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) B. Jhoanna Torres Negron		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 14 / 2012	
Mailing Address Urb. Jardines de Caparra 6 St. AC-7		Transaction ID : SA11AI.5813	
City Bayamon	State PR	Zip Code 00959-7738	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1300.00	
Name of Employer MMM	Occupation Information Systems Analyst		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1300.00		

Full Name (Last, First, Middle Initial) C. Carmelina Valentin Alicea		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 04 / 2012	
Mailing Address Urb. El Remanso A-6 Arroyo St.		Transaction ID : SA11AI.6214	
City San Juan	State PR	Zip Code 00926	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self-employed	Occupation		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	2200.00
TOTAL This Period (last page this line number only).....	2200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 150
	<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)
Rosaura Vazquez Alvarez

Mailing Address Arboles de Montehiedra
525 Ilan Ilan St.

City San Juan State PR Zip Code 00926

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 15 / 2012

Transaction ID : SA11AI.6073

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Gladys Vazquez De Nieves

Mailing Address Urb. Milaville Pina St. # 183

City San Juan State PR Zip Code 00926

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

Name of Employer Occupation
unemployed Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1075.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.5920

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
Brenda Vazquez Rodriguez

Mailing Address Cond. Paisajes del Escorial
85 Blvd. Media Luna Apt. 202

City Carolina State PR Zip Code 00987-4880

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 09 / 2012

Transaction ID : SA11AI.6940

Amount of Each Receipt this Period
100.00

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

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

425.00

**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 49 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Arlivon Vega		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 22 / 2012	
Mailing Address Street 7 M 7 El mirador		Transaction ID : SA11AI.6916	
City San Juan	State PR	Zip Code 00926	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00	
Name of Employer Self-Employed	Occupation Certified Public Accountant		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) B. Angel M. Velazquez Torres		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 23 / 2012	
Mailing Address PO Box 7438		Transaction ID : SA11AI.6619	
City Caguas	State PR	Zip Code 00726	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Self-Employed	Occupation Doctor		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. Judith Vidal Gomez		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 17 / 2012	
Mailing Address PO Box 1419		Transaction ID : SA11AI.7231	
City Guaynabo	State PR	Zip Code 00970	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Unemployed	Occupation Homemaker		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 150
	<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. Zulma A. Vilella Garcia		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 25 / 2012	
Mailing Address Urb. Torrimar Bambu St. L-4		Transaction ID : SA11AI.5952	
City Guaynabo	State PR	Zip Code 00966	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00	
Name of Employer unemployed	Occupation Homemaker		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1075.00		

Full Name (Last, First, Middle Initial) B. Zulma A. Vilella Garcia		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 29 / 2012	
Mailing Address Urb. Torrimar Bambu St. L-4		Transaction ID : SA11AI.6426	
City Guaynabo	State PR	Zip Code 00966	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer unemployed	Occupation Homemaker		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1275.00		

Full Name (Last, First, Middle Initial) C. Pedro Vivoni Alcaraz		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 16 / 2012	
Mailing Address Box 360393		Transaction ID : SA11AI.6920	
City San Juan	State PR	Zip Code 00936-0393	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Agroservicios, Inc.	Occupation Agronomist		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	775.00
TOTAL This Period (last page this line number only).....	[]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 150
	<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)
Yolanda Zayas

Mailing Address **Buenos Aires 2072**

City **San Juan** State **PR** Zip Code **00911**

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

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 17 / 2012

Transaction ID : SA11AI.7233

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Eduardo Zayas Marxuach

Mailing Address **Urb. Apolo**
QQ 19 Artemisa St.

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

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

Name of Employer **Mc Connell & Valdes** Occupation **Attorney**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 17 / 2012

Transaction ID : SA11AI.6077

Amount of Each Receipt this Period
250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

750.00

72642.07

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

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

FOR LINE NUMBER: PAGE 52 OF 150
(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)
DUANE MORRIS GOVERNMENT COMMITTEE

Mailing Address 30 SOUTH 17TH STREET

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00364133

Name of Employer Occupation

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
 04 / 23 / 2012

Transaction ID : SA11C.6193

Amount of Each Receipt this Period
 _____ 2500.00
 campaign contribution

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

_____ 2500.00

_____ 2500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 OF 150
(check only one)

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

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Central 12

Mailing Address **Centro Intl de Mercadeo Torre 1**
Suite 406

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

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2100.00

Date of Receipt
04 / 04 / 2012

Transaction ID : SA15.6300

Amount of Each Receipt this Period
2100.00

reimbursement for payment in excess-Feb. campaign event (El Nuevo Dia)

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

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

2100.00

2100.00

**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 54 OF 150	
	<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. Sami Abu Osba		Date of Disbursement MM / DD / YYYY 04 / 08 / 2012
Mailing Address Urb. San Agustin 1426 Luisa Capetilo St.		Amount of Each Disbursement this Period 1242.82 Transaction ID : SB17.6105
City San Juan State PR Zip Code 00921	Purpose of Disbursement gasoline expense Category/Type 002	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

Full Name (Last, First, Middle Initial) B. Sami Abu Osba		Date of Disbursement MM / DD / YYYY 05 / 15 / 2012
Mailing Address Urb. San Agustin 1426 Luisa Capetilo St.		Amount of Each Disbursement this Period 1387.97 Transaction ID : SB17.6145
City San Juan State PR Zip Code 00921	Purpose of Disbursement gasoline expense for campaign vehicles Category/Type 002	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

Full Name (Last, First, Middle Initial) c. Carmen E. Acevedo Betancourt		Date of Disbursement MM / DD / YYYY 04 / 02 / 2012
Mailing Address Urb. Roosevelt Canals St. #451		Amount of Each Disbursement this Period 1400.00 Transaction ID : SB17.6104
City San Juan State PR Zip Code 00918	Purpose of Disbursement Professional Services Category/Type 001	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

SUBTOTAL of Disbursements This Page (optional).....	4030.79
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 55 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Carmen E. Acevedo Betancourt		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2012
Mailing Address Urb. Roosevelt Canals St. #451		Amount of Each Disbursement this Period 1302.00 Transaction ID : SB17.6138
City San Juan State PR Zip Code 00918	Purpose of Disbursement Professional Services - FR 001 Category/Type	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

Full Name (Last, First, Middle Initial) B. Carmen E. Acevedo Betancourt		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012
Mailing Address Urb. Roosevelt Canals St. #451		Amount of Each Disbursement this Period 1015.00 Transaction ID : SB17.7160
City San Juan State PR Zip Code 00918	Purpose of Disbursement Professional Services-Media Advisor 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Action Printing		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2012
Mailing Address Loiza St. # 1603		Amount of Each Disbursement this Period 32.10 Transaction ID : SB17.6291
City Santurce State PR Zip Code 00911	Purpose of Disbursement printing of invitations - FR activity 003 Category/Type	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

SUBTOTAL of Disbursements This Page (optional).....	2349.10
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 56 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. Action Printing		M M / D D / Y Y Y Y 05 / 23 / 2012	
Mailing Address Loiza St. # 1603		Amount of Each Disbursement this Period	
City Santurce State PR Zip Code 00911		187.25	
Purpose of Disbursement printing of invitations FR activities		Transaction ID : SB17.6338	
Candidate Name COX ALOMAR 2012 INC		Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. Action Printing		M M / D D / Y Y Y Y 06 / 05 / 2012	
Mailing Address Loiza St. # 1603		Amount of Each Disbursement this Period	
City Santurce State PR Zip Code 00911		278.20	
Purpose of Disbursement Tickets for campaign activity		Transaction ID : SB17.7129	
Candidate Name		Category/ Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. Action Printing		M M / D D / Y Y Y Y 06 / 12 / 2012	
Mailing Address Loiza St. # 1603		Amount of Each Disbursement this Period	
City Santurce State PR Zip Code 00911		107.00	
Purpose of Disbursement Printing services-Fundraiser invitations		Transaction ID : SB17.7161	
Candidate Name		Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	572.45
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 57 OF 150			
	<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. Action Printing		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012
Mailing Address Loiza St. # 1603		Amount of Each Disbursement this Period 53.50
City Santurce	State PR	
Zip Code 00911	Purpose of Disbursement Printing services-Fundraiser invitations	Transaction ID : SB17.7162
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Marilyn Almodovar Ponce		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address Cond. Alborada Apt. 3732		Amount of Each Disbursement this Period 1400.00
City San Juan	State PR	
Zip Code 00959	Purpose of Disbursement Professional Services	Transaction ID : SB17.6103
Candidate Name COX ALOMAR 2012 INC	001 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

Full Name (Last, First, Middle Initial) c. Rafael Alomar Colon		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address Cond. Vista Verde Apt. 601 San Ignacio Ave.		Amount of Each Disbursement this Period 197.14
City San Juan	State PR	
Zip Code 00921	Purpose of Disbursement	Transaction ID : SB17.6100
Candidate Name COX ALOMAR 2012 INC	001 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

SUBTOTAL of Disbursements This Page (optional).....	1650.64
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 58 OF 150			
	<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. Manuel E. Avila De Jesus		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2012
Mailing Address P. O. Box 8155		Amount of Each Disbursement this Period 3360.00 Transaction ID : SB17.6110
City San Juan	State PR	
Zip Code 00910-0155	Purpose of Disbursement Professional Services - Campaign Director	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. Manuel E. Avila De Jesus		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2012
Mailing Address P. O. Box 8155		Amount of Each Disbursement this Period 123.03 Transaction ID : SB17.6156
City San Juan	State PR	
Zip Code 00910-0155	Purpose of Disbursement reimbursement for office supplies	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) c. Manuel E. Avila De Jesus		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address P. O. Box 8155		Amount of Each Disbursement this Period 68.23 Transaction ID : SB17.6176
City San Juan	State PR	
Zip Code 00910-0155	Purpose of Disbursement reimbursement for office supplies	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

SUBTOTAL of Disbursements This Page (optional).....	3551.26
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 59 OF 150	
	<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. Manuel E. Avila De Jesus		Date of Disbursement MM / DD / YYYY 05 / 07 / 2012
Mailing Address P. O. Box 8155		Amount of Each Disbursement this Period 3255.00 Transaction ID : SB17.6137
City San Juan	State PR	
Zip Code 00910-0155	Purpose of Disbursement Professional Services - Campaign Director	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. Manuel E. Avila De Jesus		Date of Disbursement MM / DD / YYYY 05 / 12 / 2012
Mailing Address P. O. Box 8155		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.6296
City San Juan	State PR	
Zip Code 00910-0155	Purpose of Disbursement reimbursement meals expense - campaign event	Category/ Type 007
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) c. Benitez Aviation Inc.		Date of Disbursement MM / DD / YYYY 04 / 23 / 2012
Mailing Address Cond. Galeria I Suite 305 201 Arterial Hostos, Hato Rey		Amount of Each Disbursement this Period 2750.00 Transaction ID : SB17.6124
City San Juan	State PR	
Zip Code 00918	Purpose of Disbursement helicopter transportation service	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

SUBTOTAL of Disbursements This Page (optional).....	6255.00
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 60 OF 150			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Benitez Aviation Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address Cond. Galeria I Suite 305 201 Arterial Hostos, Hato Rey		Amount of Each Disbursement this Period 715.00 Transaction ID : SB17.6125
City San Juan State PR Zip Code 00918	Purpose of Disbursement helicopter transportation service 002 Category/Type	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PR District: 00	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Benitez Aviation Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2012
Mailing Address Cond. Galeria I Suite 305 201 Arterial Hostos, Hato Rey		Amount of Each Disbursement this Period 3410.00 Transaction ID : SB17.6150
City San Juan State PR Zip Code 00918	Purpose of Disbursement helicopter transportation 002 Category/Type	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PR District: 00	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) c. Benitez Aviation Inc.		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2012
Mailing Address Cond. Galeria I Suite 305 201 Arterial Hostos, Hato Rey		Amount of Each Disbursement this Period 2750.00 Transaction ID : SB17.7164
City San Juan State PR Zip Code 00918	Purpose of Disbursement Helicopter transportation services 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	6875.00
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 61 OF 150			
	<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. Best Buy		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012
Mailing Address 230 Federico Costa St. Hato Rey		Amount of Each Disbursement this Period 1194.08
City San Juan State PR Zip Code 00918	Purpose of Disbursement Purchase of computers for campaign staff. Category/Type 001	
Candidate Name		Transaction ID : SB17.7246
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. Best Buy		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 230 Federico Costa St. Hato Rey		Amount of Each Disbursement this Period 896.63
City San Juan State PR Zip Code 00918	Purpose of Disbursement Purchase of computer programs. Category/Type 001	
Candidate Name		Transaction ID : SB17.7247
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. Bruno Haring & Associates		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012
Mailing Address Metro Office Park Suite 500 Metro Office 3, St. 1		Amount of Each Disbursement this Period 7500.00
City Guaynabo State PR Zip Code 00968	Purpose of Disbursement Polling Expense Category/Type 005	
Candidate Name COX ALOMAR 2012 INC		Transaction ID : SB17.6120
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: PR District: 00		

SUBTOTAL of Disbursements This Page (optional).....	9590.71
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 62 OF 150	
	<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. Bruno Haring & Associates			Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address Metro Office Park Suite 500 Metro Office 3, St. 1			Amount of Each Disbursement this Period 5625.00 Transaction ID : SB17.6144
City Guaynabo	State PR	Zip Code 00968	
Purpose of Disbursement Polling Expense		Category/Type 005	
Candidate Name COX ALOMAR 2012 INC			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: PR	District: 00		

Full Name (Last, First, Middle Initial) B. Bruno Haring & Associates			Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2012
Mailing Address Metro Office Park Suite 500 Metro Office 3, St. 1			Amount of Each Disbursement this Period 5625.00 Transaction ID : SB17.6146
City Guaynabo	State PR	Zip Code 00968	
Purpose of Disbursement Polling Expense		Category/Type 005	
Candidate Name COX ALOMAR 2012 INC			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: PR	District: 00		

Full Name (Last, First, Middle Initial) c. Caguas Expressway Motors			Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2012
Mailing Address P.O Box 50045			Amount of Each Disbursement this Period 1650.00 Transaction ID : SB17.6108
City San Juan	State PR	Zip Code 00902	
Purpose of Disbursement campaign vehicle rental		Category/Type 002	
Candidate Name COX ALOMAR 2012 INC			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: PR	District: 00		

SUBTOTAL of Disbursements This Page (optional).....	12900.00
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 63 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6241
City Loiza	State PR	
Purpose of Disbursement petty cash for meals expenses - FR activity		Category/ Type 003
Candidate Name COX ALOMAR 2012 INC		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR	District: 00	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6242
City Loiza	State PR	
Purpose of Disbursement petty cash - gasoline expense		Category/ Type 002
Candidate Name COX ALOMAR 2012 INC		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR	District: 00	

Full Name (Last, First, Middle Initial) c. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6243
City Loiza	State PR	
Purpose of Disbursement petty cash - gasoline expense		Category/ Type 002
Candidate Name COX ALOMAR 2012 INC		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR	District: 00	

SUBTOTAL of Disbursements This Page (optional).....	300.00
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 64 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6244
City Loiza	State PR	
Purpose of Disbursement petty cash - gasoline expense		Category/ Type 002
Candidate Name COX ALOMAR 2012 INC		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR	District: 00	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6245
City Loiza	State PR	
Purpose of Disbursement petty cash meals expense - campaign event		Category/ Type 007
Candidate Name COX ALOMAR 2012 INC		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR	District: 00	

Full Name (Last, First, Middle Initial) c. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6246
City Loiza	State PR	
Purpose of Disbursement petty cash - meals expense campaign event		Category/ Type 007
Candidate Name COX ALOMAR 2012 INC		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR	District: 00	

SUBTOTAL of Disbursements This Page (optional).....	300.00
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 65 OF 150			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6247
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement petty cash - gasoline expense	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6248
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement petty cash- gasoline expense	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) c. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6249
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement petty cash = gasoline expense	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

SUBTOTAL of Disbursements This Page (optional).....	300.00
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 66 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.6250
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement petty cash - vehicle maintenance	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 40.00 Transaction ID : SB17.6251
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement petty cash - toll expense	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) c. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6252
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement petty cash - meals expense campaigning event	Category/ Type 007
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

SUBTOTAL of Disbursements This Page (optional).....	200.00
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 67 OF 150			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6253
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement petty cash - gasoline expense	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6254
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement petty cash - meals expense campaign event	Category/ Type 007
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) c. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6255
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement petty gasoline - gasoline expense	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

SUBTOTAL of Disbursements This Page (optional).....	300.00
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 68 OF 150		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 100.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.6256	
Purpose of Disbursement petty cash - gasoline expense		Category/ Type 002		
Candidate Name COX ALOMAR 2012 INC				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: PR District: 00				

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 60.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.6258	
Purpose of Disbursement petty cash - meals expense trip to Orlando,Fla		Category/ Type 002		
Candidate Name COX ALOMAR 2012 INC				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: PR District: 00				

Full Name (Last, First, Middle Initial) c. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 60.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.6259	
Purpose of Disbursement petty cash - meals expense campaign event		Category/ Type 007		
Candidate Name COX ALOMAR 2012 INC				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: PR District: 00				

SUBTOTAL of Disbursements This Page (optional).....	220.00
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 69 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 100.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.6260	
Purpose of Disbursement petty cash - meals expense campaign event		Category/ Type 007		
Candidate Name COX ALOMAR 2012 INC				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: PR District: 00				

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 100.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.6261	
Purpose of Disbursement petty cash -gasoline expense		Category/ Type 002		
Candidate Name COX ALOMAR 2012 INC				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: PR District: 00				

Full Name (Last, First, Middle Initial) c. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 100.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.6262	
Purpose of Disbursement petty cash - gasoline expense		Category/ Type 002		
Candidate Name COX ALOMAR 2012 INC				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: PR District: 00				

SUBTOTAL of Disbursements This Page (optional).....	300.00
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 70 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6264
City Loiza	State PR	
Purpose of Disbursement petty cash -meals expense campaign event		Category/ Type 007
Candidate Name COX ALOMAR 2012 INC		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR	District: 00	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6272
City Loiza	State PR	
Purpose of Disbursement petty cash - meals expense campaign events		Category/ Type 007
Candidate Name COX ALOMAR 2012 INC		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR	District: 00	

Full Name (Last, First, Middle Initial) c. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6273
City Loiza	State PR	
Purpose of Disbursement petty cash - gasoline expense		Category/ Type 002
Candidate Name COX ALOMAR 2012 INC		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR	District: 00	

SUBTOTAL of Disbursements This Page (optional).....	300.00
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 71 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address PO Box 315			Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6274
City Loiza	State PR	Zip Code 00772	
Purpose of Disbursement petty cash - gasoline expense		Category/ Type 002	
Candidate Name COX ALOMAR 2012 INC			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: PR	District: 00		

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address PO Box 315			Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6275
City Loiza	State PR	Zip Code 00772	
Purpose of Disbursement petty cash - meals expense campaign event		Category/ Type 007	
Candidate Name COX ALOMAR 2012 INC			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: PR	District: 00		

Full Name (Last, First, Middle Initial) c. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address PO Box 315			Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.6277
City Loiza	State PR	Zip Code 00772	
Purpose of Disbursement petty cash - gasoline expense		Category/ Type 002	
Candidate Name COX ALOMAR 2012 INC			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: PR	District: 00		

SUBTOTAL of Disbursements This Page (optional).....	230.00
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 72 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 66.27 Transaction ID : SB17.6276
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement petty cash - gasoline expense	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 65.88 Transaction ID : SB17.6280
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement reimbursement for meals expense campaign event	Category/ Type 007
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) c. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6281
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement petty cash - gasoline expense	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

SUBTOTAL of Disbursements This Page (optional).....	242.15
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 73 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6282
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement petty cash - meals expense campaign event	Category/ Type 007
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	State: PR District: 00	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.6283
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement petty cash - toll expense	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	State: PR District: 00	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) c. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.6572
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement petty cash for toll expense	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	State: PR District: 00	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

SUBTOTAL of Disbursements This Page (optional).....	135.00
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 74 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6573
City Loiza	State PR	
Purpose of Disbursement petty cash - meal expense campaign activity		Category/ Type 007
Candidate Name COX ALOMAR 2012 INC		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR	District: 00	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6574
City Loiza	State PR	
Purpose of Disbursement petty cash - gasoline expense		Category/ Type 002
Candidate Name COX ALOMAR 2012 INC		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR	District: 00	

Full Name (Last, First, Middle Initial) c. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6285
City Loiza	State PR	
Purpose of Disbursement petty cash - meals expense campaign event		Category/ Type 007
Candidate Name COX ALOMAR 2012 INC		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR	District: 00	

SUBTOTAL of Disbursements This Page (optional).....	300.00
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 75 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 100.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.6286	
Purpose of Disbursement petty cash - gasoline expense		Category/ Type 002		
Candidate Name COX ALOMAR 2012 INC				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: PR District: 00				

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 100.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.6287	
Purpose of Disbursement petty cash - gasoline expense		Category/ Type 002		
Candidate Name COX ALOMAR 2012 INC				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: PR District: 00				

Full Name (Last, First, Middle Initial) c. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 40.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.7112	
Purpose of Disbursement Transportation expense-Campaign vehicle maintenance.		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	240.00
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 76 OF 150		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7113
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gasoline expense for campaign vehicle.	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7114
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gasoline expense for campaign vehicle.	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 183.69 Transaction ID : SB17.6148
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement reimbursement for meals - campaign event	Category/ Type 007
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

SUBTOTAL of Disbursements This Page (optional).....	383.69
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 77 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 171.75 Transaction ID : SB17.6149
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement gasoline expense	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7058
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gasoline expense for campaign vehicle.	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7059
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gasoline expense for campaign vehicle.	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	371.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 150		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7060
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals expense for campaign volunteers-Activity in Vega Alta	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7055
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gasoline expense for campaign vehicle.	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 90.00 Transaction ID : SB17.7056
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Transportation expense-Vehicle maintenance	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	290.00
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 79 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7057
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals expense for campaign vounteers-Activity in Ceiba	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7061
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals expense for campaign volunteers-Activity in Santa isabel.	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7062
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gasoline expense for campaign vehicle.	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	300.00
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 80 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address PO Box 315			Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7063
City Loiza	State PR	Zip Code 00772	
Purpose of Disbursement Gasoline expense for campaign vehicle.		Category/ Type 002	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address PO Box 315			Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7065
City Loiza	State PR	Zip Code 00772	
Purpose of Disbursement Gasoline expense for campaign vehicle.		Category/ Type 002	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address PO Box 315			Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7067
City Loiza	State PR	Zip Code 00772	
Purpose of Disbursement Gasoline expense for campaign vehicle.		Category/ Type 002	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	300.00
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 81 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 40.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.7068	
Purpose of Disbursement Gasoline expense for campaign vehicle.		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 100.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.7069	
Purpose of Disbursement Gasoline expense for campaign vehicle.		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 100.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.7070	
Purpose of Disbursement Gasoline expense for campaign vehicle.		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	240.00
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 82 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7071
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals expense for campaign volunteers-Activity in Florida.	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7072
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals expense for campaign volunteers-Activity in Areibo.	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7073
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gasoline expense for campaign vehicle.	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	300.00
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 83 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 80.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.7091	
Purpose of Disbursement Transportation expense-AutoExpreso		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 30.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.7092	
Purpose of Disbursement Transportation expense-AutoExpreso		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 50.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.7093	
Purpose of Disbursement Transportation expense-AutoExpreso		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	160.00
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 84 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 60.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.7108	
Purpose of Disbursement Gasoline expense for campaign vehicle.		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 60.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.7115	
Purpose of Disbursement Gasoline expense for campaign vehicle.		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012	
Mailing Address PO Box 315			Amount of Each Disbursement this Period 100.00	
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.7075	
Purpose of Disbursement Meals expense for campaign volunteers-Activity in Caguas.		Category/ Type 007		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	220.00
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 85 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 40.00
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gasoline expense for campaign vehicle.	Transaction ID : SB17.7076
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 180.00
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Reimbursement for meals and gasoline expense.	Transaction ID : SB17.7126
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 20.00
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Transportation expense-AutoExpreso	Transaction ID : SB17.7098
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	240.00
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 86 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7099
City Loiza	State PR	
Purpose of Disbursement Gasoline expense for campaign vehicle.		Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7100
City Loiza	State PR	
Purpose of Disbursement Gasoline expense for campaign vehicle.		Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7101
City Loiza	State PR	
Purpose of Disbursement Meals expense for campaign volunteers-Activity in Lares.		Category/ Type 007
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	300.00
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 87 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7094
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals expense for campaign volunteers-Activity in Caguas.	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7095
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gasoline expense for campaign vehicle.	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7096
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gasoline expense for campaign vehicle.	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	300.00
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 88 OF 150		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 80.00
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Transportation expense-AutoExpreso.	Transaction ID : SB17.7097
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 178.01
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Reimbursement of gasoline expense for campaign vehicles	Transaction ID : SB17.7151
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 156.30
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Reimbursement of meals expense for campaign volunteers.	Transaction ID : SB17.7152
Candidate Name	Category/ Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	414.31
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 160.00 Transaction ID : SB17.7102
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gasoline expense for campaign vehicle.	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.7103
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals expense for campaign volunteers-Activity in Hormigueros.	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7104
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gasoline expense for campaign vehicle.	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	500.00
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 90 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.7105
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals expense for campaign volunteers-Activity in San Juan.	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 284.53 Transaction ID : SB17.7178
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Reimbursement for gas and meals expenses for campaign volunteers.	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.7080
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gasoline expense for campaign vehicle.	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	554.53
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 91 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2012		
Mailing Address PO Box 315			Amount of Each Disbursement this Period 30.00		
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.7081		
Purpose of Disbursement Gasoline expense for campaign vehicle.		Category/ Type 002			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2012		
Mailing Address PO Box 315			Amount of Each Disbursement this Period 50.00		
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.7082		
Purpose of Disbursement Gasoline expense for campaign vehicle.		Category/ Type 002			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2012		
Mailing Address PO Box 315			Amount of Each Disbursement this Period 50.00		
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.7083		
Purpose of Disbursement Gasoline expense for campaign vehicle.		Category/ Type 002			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	130.00
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 92 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 220.00 Transaction ID : SB17.7084
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals expense for campaign volunteers-Activity in Aibonito.	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7085
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals expense for campaign volunteers-Activity in Corozal and Aibonito.	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 120.00 Transaction ID : SB17.7086
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Meals expense for campaign volunteers-Activity in Corozal and Naranjito.	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	440.00
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 93 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.7087
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gasoline expense for campaign vehicle.	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.7088
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gasoline expense for campaign vehicle.	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.7089
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gasoline expense for campaign vehicle.	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	110.00
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 94 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.7090
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gasoline expense for campaign vehicle.	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 86.00 Transaction ID : SB17.7109
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Field operations materials-Lights	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7110
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Gasoline expense for campaign vehicle.	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	236.00
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 95 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012		
Mailing Address PO Box 315			Amount of Each Disbursement this Period 220.00		
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.7111		
Purpose of Disbursement Meals expense for campaign volunteers-Activity in Lajas.		Category/ Type 007			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012		
Mailing Address PO Box 315			Amount of Each Disbursement this Period 90.00		
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.7106		
Purpose of Disbursement Gasoline expense for campaign vehicle.		Category/ Type 002			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. Luis Calderon Navarro			Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012		
Mailing Address PO Box 315			Amount of Each Disbursement this Period 220.00		
City Loiza	State PR	Zip Code 00772	Transaction ID : SB17.7107		
Purpose of Disbursement Meals expense for campaign volunteers-Activity in Caguas.		Category/ Type 007			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	530.00
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 96 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Central 12		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2012
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406		Amount of Each Disbursement this Period 1712.00 Transaction ID : SB17.6129
City Guaynabo State PR Zip Code 00968	Purpose of Disbursement poster- campaign event Category/Type 007	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

Full Name (Last, First, Middle Initial) B. Central 12		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2012
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.6307
City Guaynabo State PR Zip Code 00968	Purpose of Disbursement Radio Transmision - Radio Luz 740 AM Category/Type 004	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

Full Name (Last, First, Middle Initial) c. Maria G. Chevere Mourino		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012
Mailing Address Urb. San Patricio Calle Cerezo #5		Amount of Each Disbursement this Period 676.33 Transaction ID : SB17.6873
City Guaynabo State PR Zip Code 00968	Purpose of Disbursement In-kind - Meals and beverages expense for fundraising activity. Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2888.33
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 97 OF 150			
	<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. Claro PRT		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2012
Mailing Address PO Box 70366		Amount of Each Disbursement this Period 221.26 Transaction ID : SB17.6173
City San Juan	State PR	
Zip Code 00936-8366	Purpose of Disbursement mobile phones service	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. Claro PRT		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2012
Mailing Address PO Box 70366		Amount of Each Disbursement this Period 211.40 Transaction ID : SB17.6116
City San Juan	State PR	
Zip Code 00936-8366	Purpose of Disbursement mobile phones services	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) C. Claro PRT		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2012
Mailing Address PO Box 70366		Amount of Each Disbursement this Period 208.00 Transaction ID : SB17.6135
City San Juan	State PR	
Zip Code 00936-8366	Purpose of Disbursement mobile phones service	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

SUBTOTAL of Disbursements This Page (optional).....	640.66
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 98 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Jose Cruz		Date of Disbursement MM / DD / YYYY 05 / 02 / 2012
Mailing Address PO Box 443		Amount of Each Disbursement this Period 1965.00 Transaction ID : SB17.6182
City Juncos	State PR	
Zip Code 00777	Purpose of Disbursement Professional Services - Media Consultant	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. Jose Cruz		Date of Disbursement MM / DD / YYYY 06 / 12 / 2012
Mailing Address PO Box 443		Amount of Each Disbursement this Period 1860.00 Transaction ID : SB17.7150
City Juncos	State PR	
Zip Code 00777	Purpose of Disbursement Professional Services-Media Advisor	Category/ Type 001
Candidate Name	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) c. Ivelisse De Jesus		Date of Disbursement MM / DD / YYYY 05 / 11 / 2012
Mailing Address PO Box 367921		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6278
City San Juan	State PR	
Zip Code 00936-7921	Purpose of Disbursement petty cash - meals expense campaign event	Category/ Type 007
Candidate Name COX ALOMAR 2012 INC	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PR District: 00	

SUBTOTAL of Disbursements This Page (optional).....	3925.00
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 99 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Ivelisse De Jesus		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address PO Box 367921		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6279
City San Juan State PR Zip Code 00936-7921	Purpose of Disbursement petty cash - beverages expense for FR activity 003 Category/Type	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

Full Name (Last, First, Middle Initial) B. Ivelisse De Jesus		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address PO Box 367921		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7253
City San Juan State PR Zip Code 00936-7921	Purpose of Disbursement Reimbursement of meals and gas expenses-Fundraiser Anasco 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Ivelisse De Jesus		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address PO Box 367921		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7254
City San Juan State PR Zip Code 00936-7921	Purpose of Disbursement Reimbursement of meals and gas expenses-Fundraiser Aguadilla 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	300.00
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 100 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Ivelisse De Jesus		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address PO Box 367921		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7255
City San Juan	State PR	
Zip Code 00936-7921	Purpose of Disbursement Reimbursement of meals and gas expenses-Trip to Vega Baja, Vega Alta and Toa Baja	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Ivelisse De Jesus		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address PO Box 367921		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7256
City San Juan	State PR	
Zip Code 00936-7921	Purpose of Disbursement Reimbursement of meals and gas expenses-Fundraiser Morovis	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Ivelisse De Jesus		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address PO Box 367921		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.7257
City San Juan	State PR	
Zip Code 00936-7921	Purpose of Disbursement Reimbursement of meals and gas expenses-Fundraiser Aguadilla	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	300.00
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 101 OF 150	
	<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. Dorado Municipality		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2012
Mailing Address Mendez Vigo y San Quintin		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.7168
City Dorado	State PR Zip Code 00646	
Purpose of Disbursement Gazebo rental	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Iris Duprey Anaya		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address 2 Cond. San Fernando VLG Apt 109		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7154
City Carolina	State PR Zip Code 00987	
Purpose of Disbursement Popular Democratic Party Convention-Meals expense for campaign staff.	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Jaime A. Espada		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address PO Box 473		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.7139
City Coamo	State PR Zip Code 00769	
Purpose of Disbursement Professional services-Event Coordinator	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1750.00
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 102 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Carl Gibbs Acosta		Date of Disbursement MM / DD / YYYY 04 / 03 / 2012
Mailing Address Cape Village B-4 Buzon 110		Amount of Each Disbursement this Period 1965.00 Transaction ID : SB17.6099
City Carolina	State PR	
Zip Code 00979	Purpose of Disbursement Professional Services - statistical analysis	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR	District: 00	

Full Name (Last, First, Middle Initial) B. Carl Gibbs Acosta		Date of Disbursement MM / DD / YYYY 05 / 10 / 2012
Mailing Address Cape Village B-4 Buzon 110		Amount of Each Disbursement this Period 1860.00 Transaction ID : SB17.6139
City Carolina	State PR	
Zip Code 00979	Purpose of Disbursement Professional Services - statistical analysis	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR	District: 00	

Full Name (Last, First, Middle Initial) c. Carl Gibbs Acosta		Date of Disbursement MM / DD / YYYY 06 / 01 / 2012
Mailing Address Cape Village B-4 Buzon 110		Amount of Each Disbursement this Period 1860.00 Transaction ID : SB17.7124
City Carolina	State PR	
Zip Code 00979	Purpose of Disbursement Professional Services-Statistical Analysis	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	5685.00
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 103 OF 150	
	<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. Glory's Catering Service		Date of Disbursement MM / DD / YYYY 05 / 18 / 2012
Mailing Address Urb. Golden Village Primavera St. D-85		Amount of Each Disbursement this Period 360.00 Transaction ID : SB17.6339
City Vega Alta	State PR	
Zip Code 00962	Purpose of Disbursement catering costs - FR activity	Category/ Type 003
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. IMEF Printing		Date of Disbursement MM / DD / YYYY 06 / 07 / 2012
Mailing Address 161 Ponce de Leon Ave. Suite 103		Amount of Each Disbursement this Period 615.25 Transaction ID : SB17.7142
City San Juan	State PR	
Zip Code 00917	Purpose of Disbursement Popular Democratic Party Convention-Door hangers	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. IMEF Printing		Date of Disbursement MM / DD / YYYY 06 / 07 / 2012
Mailing Address 161 Ponce de Leon Ave. Suite 103		Amount of Each Disbursement this Period 508.25 Transaction ID : SB17.7144
City San Juan	State PR	
Zip Code 00917	Purpose of Disbursement Popular Democratic Party Convention-Boarding Passes	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1483.50
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 104 OF 150	
	<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. Importadora Espanola		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2012
Mailing Address Corporate Office Park Road No. 20 Suite 500		Amount of Each Disbursement this Period 560.55 Transaction ID : SB17.6147
City Guaynabo State PR Zip Code 00966	Purpose of Disbursement Committee's office furniture 001 Category/Type	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

Full Name (Last, First, Middle Initial) B. Javier Lamboy		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		Amount of Each Disbursement this Period 2325.00 Transaction ID : SB17.6132
City San Juan State PR Zip Code 00917	Purpose of Disbursement Professional Services - Compliance 001 Category/Type	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

Full Name (Last, First, Middle Initial) c. Javier Lamboy		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		Amount of Each Disbursement this Period 175.00 Transaction ID : SB17.6133
City San Juan State PR Zip Code 00917	Purpose of Disbursement reimbursement gasoline expense 002 Category/Type	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

SUBTOTAL of Disbursements This Page (optional).....	3060.55
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 105 OF 150	
	<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 Lamboy		Date of Disbursement MM / DD / YYYY 05 / 31 / 2012
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		Amount of Each Disbursement this Period 2325.00 Transaction ID : SB17.7515
City San Juan State PR Zip Code 00917	Purpose of Disbursement Professional services-Asisstant treasurer, Compliance advisor 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Javier Lamboy		Date of Disbursement MM / DD / YYYY 05 / 31 / 2012
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		Amount of Each Disbursement this Period 175.00 Transaction ID : SB17.7516
City San Juan State PR Zip Code 00917	Purpose of Disbursement Reimbursement of gas expenses 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Javier Lamboy		Date of Disbursement MM / DD / YYYY 06 / 05 / 2012
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		Amount of Each Disbursement this Period 120.00 Transaction ID : SB17.7513
City San Juan State PR Zip Code 00917	Purpose of Disbursement Disbursement for field operations staff expenses. 007 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2620.00
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 106 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. LMV Specialties		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2012
Mailing Address PO Box 13868		Amount of Each Disbursement this Period 3216.20 Transaction ID : SB17.7165
City San Juan State PR Zip Code 00908	Purpose of Disbursement Popular Democratic Party Convention-Plastic glasses Candidate Name Category/Type 010	
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. LMV Specialties		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2012
Mailing Address PO Box 13868		Amount of Each Disbursement this Period 580.00 Transaction ID : SB17.7167
City San Juan State PR Zip Code 00908	Purpose of Disbursement Hats Candidate Name Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Ernesto Morales Ramos		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 2 Cond. San Francisco VLG Apt. 109		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.6179
City Carolina State PR Zip Code 00987-6950	Purpose of Disbursement Professional Services - Communications Consultant Candidate Name Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

SUBTOTAL of Disbursements This Page (optional).....	3216.20
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 107 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Ernesto Morales Ramos		Date of Disbursement MM / DD / YYYY 05 / 07 / 2012
Mailing Address 2 Cond. San Francisco VLG Apt. 109		Amount of Each Disbursement this Period 1412.50 Transaction ID : SB17.6181
City Carolina	State PR	
Zip Code 00987-6950	Purpose of Disbursement Professional Services -Communications Consultant	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR	District: 00	

Full Name (Last, First, Middle Initial) B. Ernesto Morales Ramos		Date of Disbursement MM / DD / YYYY 06 / 07 / 2012
Mailing Address 2 Cond. San Francisco VLG Apt. 109		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.7135
City Carolina	State PR	
Zip Code 00987-6950	Purpose of Disbursement Professional services-Media Advisor	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) c. Musique Xpress Lights, Inc.		Date of Disbursement MM / DD / YYYY 06 / 07 / 2012
Mailing Address Minillas Industrial Park 308 D Street		Amount of Each Disbursement this Period 337.05 Transaction ID : SB17.7145
City Bayamosn	State PR	
Zip Code 00959	Purpose of Disbursement Popular Democratic Party Convention-Lights Rental	Category/ Type 007
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	2749.55
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 108 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. One Link Communications		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address PO Box 192296		Amount of Each Disbursement this Period 651.39 Transaction ID : SB17.6171
City San Juan	State PR	
Zip Code 00919-2296	Purpose of Disbursement telephone/cable service	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. One Link Communications		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address PO Box 192296		Amount of Each Disbursement this Period 181.59 Transaction ID : SB17.6172
City San Juan	State PR	
Zip Code 00919-2296	Purpose of Disbursement telephone/cable service	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) c. One Link Communications		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2012
Mailing Address PO Box 192296		Amount of Each Disbursement this Period 314.65 Transaction ID : SB17.6174
City San Juan	State PR	
Zip Code 00919-2296	Purpose of Disbursement telephone/cable service	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

SUBTOTAL of Disbursements This Page (optional).....	1147.63
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 109 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. One Link Communications		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2012
Mailing Address PO Box 192296		Amount of Each Disbursement this Period 82.06 Transaction ID : SB17.6175
City San Juan State PR Zip Code 00919-2296	Purpose of Disbursement telephone/cable service	
Candidate Name COX ALOMAR 2012 INC		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

Full Name (Last, First, Middle Initial) B. Mario Oronoz		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2012
Mailing Address Torrimar Alto Bamboo K4		Amount of Each Disbursement this Period 913.93 Transaction ID : SB17.6762
City Guaynabo State PR Zip Code 00966	Purpose of Disbursement In-kind - Meals and beverages expense for fundraising activity	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Partido Popular Democratico Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 403 Constitucion Ave.		Amount of Each Disbursement this Period 950.00 Transaction ID : SB17.6292
City San Juan State PR Zip Code 00906	Purpose of Disbursement office space rental - April	
Candidate Name COX ALOMAR 2012 INC		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

SUBTOTAL of Disbursements This Page (optional).....	1945.99
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 110 OF 150	
	<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. Partido Popular Democratico Inc.			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 403 Constitucion Ave.			Amount of Each Disbursement this Period 950.00 Transaction ID : SB17.6293
City San Juan	State PR	Zip Code 00906	
Purpose of Disbursement Office space rental - May		Category/ Type 001	
Candidate Name COX ALOMAR 2012 INC			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: PR	District: 00		

Full Name (Last, First, Middle Initial) B. Pizza Hut			Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2012
Mailing Address Ponce de leon Ave. Pda. 18 Santurce			Amount of Each Disbursement this Period 234.32 Transaction ID : SB17.6304
City San Juan	State PR	Zip Code 00907	
Purpose of Disbursement meals expense - campaign staff - lunch meeting		Category/ Type 001	
Candidate Name COX ALOMAR 2012 INC			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: PR	District: 00		

Full Name (Last, First, Middle Initial) c. Elliot R. Ramirez Perez			Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2012
Mailing Address Urb. Monte Claro MK-38 Plaza 40			Amount of Each Disbursement this Period 1240.74 Transaction ID : SB17.6766
City Bayamon	State PR	Zip Code 00961	
Purpose of Disbursement In-kind - Meals and beverages expense for fundraising activity		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	2425.06
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 111 OF 150			
	<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. Ricoh PR		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2012
Mailing Address National Plaza Bldg suite 1700 431 Ponce de Leon Ave.		Amount of Each Disbursement this Period 610.00 Transaction ID : SB17.6115
City San Juan State PR Zip Code 00917	Purpose of Disbursement printer/fax/photocopier machine rental Category/Type 001	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

Full Name (Last, First, Middle Initial) B. Ricoh PR		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2012
Mailing Address National Plaza Bldg suite 1700 431 Ponce de Leon Ave.		Amount of Each Disbursement this Period 305.00 Transaction ID : SB17.6134
City San Juan State PR Zip Code 00917	Purpose of Disbursement printer/fax/photocopier machine rental Category/Type 001	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

Full Name (Last, First, Middle Initial) c. Rio Mar Beach Resort		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2012
Mailing Address 6000 Rio Mar Blvd		Amount of Each Disbursement this Period 653.79 Transaction ID : SB17.6294
City Rio Grande State PR Zip Code 00745-6100	Purpose of Disbursement room reservations for candidate and personnel - PPD Convention Category/Type 007	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

SUBTOTAL of Disbursements This Page (optional).....	1568.79
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 112 OF 150	
	<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. Rio Mar Beach Resort		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2012
Mailing Address 6000 Rio Mar Blvd		Amount of Each Disbursement this Period 2853.61
City Rio Grande	State PR	
Zip Code 00745-6100	Purpose of Disbursement Popular Democratic Party Convention-Hotel charges	Transaction ID : SB17.7182
Candidate Name	Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. A. Miguel Rios		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address Valle Verde II Ap-1 Rio Maravilla Street		Amount of Each Disbursement this Period 1300.00
City Bayamon	State PR	
Zip Code 00961	Purpose of Disbursement Professional services-Sound vehicles for campaign events.	Transaction ID : SB17.7175
Candidate Name	Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Dolores Rodriguez d Oronoz		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2012
Mailing Address Torrimar Alto, Bamboo K4		Amount of Each Disbursement this Period 913.93
City Guaynabo	State PR	
Zip Code 00966	Purpose of Disbursement In-kind - Meals and beverages expense for fundraising activity	Transaction ID : SB17.6767
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5067.54
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 113 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Carmen Angeles Rodriguez Weber		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address Cond. Torre de los Frailes Apt. 11 J		Amount of Each Disbursement this Period 17.70 Transaction ID : SB17.6140
City Guaynabo State PR Zip Code 00969	Purpose of Disbursement reimbursement for bottled water - Committee's office 001 Category/Type	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

Full Name (Last, First, Middle Initial) B. Carmen Angeles Rodriguez Weber		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2012
Mailing Address Cond. Torre de los Frailes Apt. 11 J		Amount of Each Disbursement this Period 120.52 Transaction ID : SB17.6121
City Guaynabo State PR Zip Code 00969	Purpose of Disbursement reimbursement for office supplies - FR 003 Category/Type	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

Full Name (Last, First, Middle Initial) c. Carmen Angeles Rodriguez Weber		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2012
Mailing Address Cond. Torre de los Frailes Apt. 11 J		Amount of Each Disbursement this Period 6.42 Transaction ID : SB17.6141
City Guaynabo State PR Zip Code 00969	Purpose of Disbursement reimbursement for copies of keys - Committee's office 001 Category/Type	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

SUBTOTAL of Disbursements This Page (optional).....	144.64
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 114 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Carmen Angeles Rodriguez Weber		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address Cond. Torre de los Frailes Apt. 11 J		Amount of Each Disbursement this Period 40.00 Transaction ID : SB17.6284
City Guaynabo State PR Zip Code 00969	Purpose of Disbursement office supplies 001 Category/Type	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: PR District: 00		

Full Name (Last, First, Middle Initial) B. Carmen Angeles Rodriguez Weber		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address Cond. Torre de los Frailes Apt. 11 J		Amount of Each Disbursement this Period 1860.00 Transaction ID : SB17.6143
City Guaynabo State PR Zip Code 00969	Purpose of Disbursement Professional Services - FR 001 Category/Type	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: PR District: 00		

Full Name (Last, First, Middle Initial) c. Carmen Angeles Rodriguez Weber		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address Cond. Torre de los Frailes Apt. 11 J		Amount of Each Disbursement this Period 15.62 Transaction ID : SB17.6188
City Guaynabo State PR Zip Code 00969	Purpose of Disbursement reimbursement office supplies 001 Category/Type	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: PR District: 00		

SUBTOTAL of Disbursements This Page (optional).....	1915.62
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 115 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Carmen Angeles Rodriguez Weber		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012
Mailing Address Cond. Torre de los Frailes Apt. 11 J		Amount of Each Disbursement this Period 1860.00 Transaction ID : SB17.7149
City Guaynabo	State PR Zip Code 00969	
Purpose of Disbursement Professional Services-Fundraiser Coordinator	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Carmen Angeles Rodriguez Weber		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2012
Mailing Address Cond. Torre de los Frailes Apt. 11 J		Amount of Each Disbursement this Period 90.00 Transaction ID : SB17.7173
City Guaynabo	State PR Zip Code 00969	
Purpose of Disbursement Purchase of office materials-Envelopes	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Carmen Angeles Rodriguez Weber		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2012
Mailing Address Cond. Torre de los Frailes Apt. 11 J		Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.7174
City Guaynabo	State PR Zip Code 00969	
Purpose of Disbursement Purchase of office materials-Paper	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2010.00
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 116 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Carmen Angeles Rodriguez Weber		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2012
Mailing Address Cond. Torre de los Frailes Apt. 11 J		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.7426
City Guaynabo State PR Zip Code 00969	Purpose of Disbursement Fundraiser expenses 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Carmen Angeles Rodriguez Weber		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address Cond. Torre de los Frailes Apt. 11 J		Amount of Each Disbursement this Period 40.00 Transaction ID : SB17.7074
City Guaynabo State PR Zip Code 00969	Purpose of Disbursement Office materials Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Jaime Luis Sanabria Montanez		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2012
Mailing Address P.O. Box 367921		Amount of Each Disbursement this Period 80.00 Transaction ID : SB17.6257
City San Juan State PR Zip Code 00936-7921	Purpose of Disbursement petty cash - taxi expense - Trip to Orlando, Fla 002 Category/Type	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

SUBTOTAL of Disbursements This Page (optional).....	150.00
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 117 OF 150	
	<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. Jaime Luis Sanabria Montanez		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2012
Mailing Address P.O. Box 367921		Amount of Each Disbursement this Period 439.40 Transaction ID : SB17.6128
City San Juan	State PR	
Zip Code 00936-7921	Purpose of Disbursement Travel expense - trip to New York	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. Jaime Luis Sanabria Montanez		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2012
Mailing Address P.O. Box 367921		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6263
City San Juan	State PR	
Zip Code 00936-7921	Purpose of Disbursement petty cash - toll expense	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) C. Jaime Luis Sanabria Montanez		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address P.O. Box 367921		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6266
City San Juan	State PR	
Zip Code 00936-7921	Purpose of Disbursement petty cash - taxi expense trip to New York	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

SUBTOTAL of Disbursements This Page (optional).....	639.40
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 118 OF 150	
	<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. Jaime Luis Sanabria Montanez		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address P.O. Box 367921		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6267
City San Juan	State PR	
Zip Code 00936-7921	Purpose of Disbursement petty cash - meals expense trip to New York	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. Jaime Luis Sanabria Montanez		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address P.O. Box 367921		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6268
City San Juan	State PR	
Zip Code 00936-7921	Purpose of Disbursement petty cash - taxi expense trip to New York	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) C. Jaime Luis Sanabria Montanez		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address P.O. Box 367921		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6269
City San Juan	State PR	
Zip Code 00936-7921	Purpose of Disbursement petty cash - meals expense trip to New York	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

SUBTOTAL of Disbursements This Page (optional).....	300.00
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 119 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Christopher Sanchez Ortiz		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address PO Box 194555		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.6102
City San Juan	State PR	
Zip Code 00919	Purpose of Disbursement Professional Services - Field Operations	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR	District: 00	

Full Name (Last, First, Middle Initial) B. Christopher Sanchez Ortiz		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2012
Mailing Address PO Box 194555		Amount of Each Disbursement this Period 483.28 Transaction ID : SB17.6162
City San Juan	State PR	
Zip Code 00919	Purpose of Disbursement reimbursement for meals expenses - campaign events	Category/ Type 007
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR	District: 00	

Full Name (Last, First, Middle Initial) c. Christopher Sanchez Ortiz		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2012
Mailing Address PO Box 194555		Amount of Each Disbursement this Period 1395.00 Transaction ID : SB17.6142
City San Juan	State PR	
Zip Code 00919	Purpose of Disbursement Professional Services - field operations	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR	District: 00	

SUBTOTAL of Disbursements This Page (optional).....	3378.28
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 120 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Christopher Sanchez Ortiz		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2012
Mailing Address PO Box 194555		Amount of Each Disbursement this Period 654.18 Transaction ID : SB17.6186
City San Juan	State PR	
Zip Code 00919	Purpose of Disbursement reimbursement for meals expenses for campaign volunteers - campaing events	Category/ Type 007
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. Christopher Sanchez Ortiz		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2012
Mailing Address PO Box 194555		Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.7064
City San Juan	State PR	
Zip Code 00919	Purpose of Disbursement Transportation expense-AutoExpreso	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Christopher Sanchez Ortiz		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012
Mailing Address PO Box 194555		Amount of Each Disbursement this Period 1395.00 Transaction ID : SB17.7153
City San Juan	State PR	
Zip Code 00919	Purpose of Disbursement Professional Services-Candidate assistant	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2109.18
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 121 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Christopher Sanchez Ortiz		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2012
Mailing Address PO Box 194555		Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.7079
City San Juan	State PR	
Zip Code 00919	Purpose of Disbursement Transportation expense-AutoExpreso	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Maria L. Santaella Arguinzoni		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2012
Mailing Address PO Box 366676		Amount of Each Disbursement this Period 28.34 Transaction ID : SB17.6111
City San Juan	State PR	
Zip Code 00936	Purpose of Disbursement reimbursement for office supplies	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) c. Maria L. Santaella Arguinzoni		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2012
Mailing Address PO Box 366676		Amount of Each Disbursement this Period 80.81 Transaction ID : SB17.6112
City San Juan	State PR	
Zip Code 00936	Purpose of Disbursement reimbursement for office supplies	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

SUBTOTAL of Disbursements This Page (optional).....	169.15
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 122 OF 150	
	<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. Maria L. Santaella Arguinzoni		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2012
Mailing Address PO Box 366676		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.6157
City San Juan	State PR	
Zip Code 00936	Purpose of Disbursement reimbursement - installation of a door at Committee's office	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. Maria L. Santaella Arguinzoni		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2012
Mailing Address PO Box 366676		Amount of Each Disbursement this Period 271.77 Transaction ID : SB17.6228
City San Juan	State PR	
Zip Code 00936	Purpose of Disbursement In-kind - File Cabinet	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Maria L. Santaella Arguinzoni		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address PO Box 366676		Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.6271
City San Juan	State PR	
Zip Code 00936	Purpose of Disbursement petty cash for office supplies	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

SUBTOTAL of Disbursements This Page (optional).....	491.77
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 123 OF 150	
	<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. Maria L. Santaella Arguinzoni		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2012
Mailing Address PO Box 366676		Amount of Each Disbursement this Period 18.29
City San Juan	State PR	
Zip Code 00936	Purpose of Disbursement In-kind - Office Materials, Box and Binder.	Transaction ID : SB17.6931
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Maria L. Santaella Arguinzoni		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2012
Mailing Address PO Box 366676		Amount of Each Disbursement this Period 60.00
City San Juan	State PR	
Zip Code 00936	Purpose of Disbursement In-kind - Office Materials, cards.	Transaction ID : SB17.6932
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Maria L. Santaella Arguinzoni		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address PO Box 366676		Amount of Each Disbursement this Period 43.98
City San Juan	State PR	
Zip Code 00936	Purpose of Disbursement In-kind - Office Materials	Transaction ID : SB17.6929
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	122.27
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 124 OF 150	
	<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. Maria L. Santaella Arguinzoni		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address PO Box 366676		Amount of Each Disbursement this Period 32.10 Transaction ID : SB17.6930
City San Juan	State PR	
Zip Code 00936	Purpose of Disbursement In-kind - Office Materials	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Sun Colors		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address PO Box 99		Amount of Each Disbursement this Period 789.66 Transaction ID : SB17.7133
City Bayamon	State PR	
Zip Code 00960	Purpose of Disbursement Popular Democratic Party Convention-Booth	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Swable Restaurant Concepts Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2012
Mailing Address 304 Ponce de Leon Ave. Hato Rey		Amount of Each Disbursement this Period 1872.50 Transaction ID : SB17.6584
City San Juan	State PR	
Zip Code 00918	Purpose of Disbursement catering costs for FR Activity	Category/ Type 003
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: PR District: 00	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2694.26
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 125 OF 150	
	<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. Team Camacho Design		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address Calle 3 C-35 Condado Moderno		Amount of Each Disbursement this Period 678.00 Transaction ID : SB17.7484
City Caguas	State PR Zip Code 00725	
Purpose of Disbursement Popular Democratic Party Convention-Campaign T-shirts		Category/ Type 006
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Team Camacho Design		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address Calle 3 C-35 Condado Moderno		Amount of Each Disbursement this Period 290.35 Transaction ID : SB17.7486
City Caguas	State PR Zip Code 00725	
Purpose of Disbursement Popular Democratic Party Convention-Campaign T-shirts		Category/ Type 006
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address Fernandez Juncos Station		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.7171
City San Juan	State PR Zip Code 00909	
Purpose of Disbursement Purchase of mail stamps.		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1118.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 126 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Edgardo Miguel Vazquez Rivera		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address Tabonuco St. B-5 suite 216 PMB-112		Amount of Each Disbursement this Period 2430.00 Transaction ID : SB17.6101
City Guaynabo State PR Zip Code 00968-3022	Purpose of Disbursement Professional Services 001 Category/Type	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

Full Name (Last, First, Middle Initial) B. Edgardo Miguel Vazquez Rivera		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address Tabonuco St. B-5 suite 216 PMB-112		Amount of Each Disbursement this Period 2325.00 Transaction ID : SB17.6136
City Guaynabo State PR Zip Code 00968-3022	Purpose of Disbursement Professional Services 001 Category/Type	
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

Full Name (Last, First, Middle Initial) c. Edgardo Miguel Vazquez Rivera		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address Tabonuco St. B-5 suite 216 PMB-112		Amount of Each Disbursement this Period 2150.00 Transaction ID : SB17.7148
City Guaynabo State PR Zip Code 00968-3022	Purpose of Disbursement Professional Services-Issues Director 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6905.00
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 127 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Edgardo Miguel Vazquez Rivera		Date of Disbursement MM / DD / YYYY 06 / 19 / 2012
Mailing Address Tabonuco St. B-5 suite 216 PMB-112		Amount of Each Disbursement this Period 2325.00 Transaction ID : SB17.7172
City Guaynabo State PR Zip Code 00968-3022	Purpose of Disbursement Professional services-Political Director Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Vias Car Rental of P.R.		Date of Disbursement MM / DD / YYYY 05 / 21 / 2012
Mailing Address Urb. Costa de Oro C-2 Marginal St.		Amount of Each Disbursement this Period 1532.93 Transaction ID : SB17.6299
City Dorado State PR Zip Code 00646-2055	Purpose of Disbursement campaign vehicles rental - ck 1193 partial amount Candidate Name Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) c. Vias Car Rental of P.R.		Date of Disbursement MM / DD / YYYY 05 / 31 / 2012
Mailing Address Urb. Costa de Oro C-2 Marginal St.		Amount of Each Disbursement this Period 1285.35 Transaction ID : SB17.7122
City Dorado State PR Zip Code 00646-2055	Purpose of Disbursement Campaign vehicles rentals- Partial amount Ck1194 Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5143.28
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 128 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Vias Car Rental of PR		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address Isla Verde		Amount of Each Disbursement this Period 1045.15 Transaction ID : SB17.6298
City Carolina	State PR	
Zip Code 00979	Purpose of Disbursement campaign vehicles rental - ck1193 partial amount.	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. Wave Ranch Inc.		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2012
Mailing Address HC 72 Box 3766 PMB 323		Amount of Each Disbursement this Period 911.64 Transaction ID : SB17.7131
City Naranjito	State PR	
Zip Code 00719-9788	Purpose of Disbursement Campaign staff t-shirts.	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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).....	1956.79
TOTAL This Period (last page this line number only).....	127484.17

**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 129 OF 150	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.6151
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Deposit to VISA travel card	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 8.00 Transaction ID : SB21.6152
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement VISA travel card service fee	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) c. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 20.00 Transaction ID : SB21.6153
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement bank service fee	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

SUBTOTAL of Disbursements This Page (optional).....	1028.00
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 130 OF 150	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2012
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 80.32 Transaction ID : SB21.6154
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Harland checks order	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.6165
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Deposit VISA Travel Card	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) c. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 8.00 Transaction ID : SB21.6166
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement service fee for VISA travel card	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

SUBTOTAL of Disbursements This Page (optional).....	1088.32
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 131 OF 150			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2012
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.6167
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Deposit for VISA Travel Card	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2012
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 8.00 Transaction ID : SB21.6168
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement service fee for VISA Travel Card	Category/ Type 002
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) c. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 11.00 Transaction ID : SB21.6155
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement charge for excess of transactions	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

SUBTOTAL of Disbursements This Page (optional).....	1019.00
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 132 OF 150	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 20.00 Transaction ID : SB21.6169
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement bank service fee	Category/ Type 001
Candidate Name COX ALOMAR 2012 INC	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PR District: 00	

Full Name (Last, First, Middle Initial) B. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 117.50 Transaction ID : SB21.7119
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Charge for transactions	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2012
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 20.00 Transaction ID : SB21.7487
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: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	157.50
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 133 OF 150	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 58.00
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Excess transactions fee	Transaction ID : SB21.7488
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Secretario de Hacienda		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address PO Box 9024140		Amount of Each Disbursement this Period 385.00
City San Juan	State PR	
Zip Code 00902-4140	Purpose of Disbursement income tax retention for professional services	Transaction ID : SB21.6161
Candidate Name COX ALOMAR 2012 INC	001 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

Full Name (Last, First, Middle Initial) c. Secretario de Hacienda		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address PO Box 9024140		Amount of Each Disbursement this Period 721.00
City San Juan	State PR	
Zip Code 00902-4140	Purpose of Disbursement income tax retention for Professional Services	Transaction ID : SB21.6187
Candidate Name COX ALOMAR 2012 INC	001 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PR District: 00		

SUBTOTAL of Disbursements This Page (optional).....	1164.00
TOTAL This Period (last page this line number only).....	4456.82

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Central 12

Nature of Debt (Purpose):
 owed to committee due to payment in excess - quotation vs invoice 201214

Mailing Address Centro Intl de Mercadeo Torre 1
 Suite 406

City State Zip Code
 Guaynabo PR 00968

Outstanding Balance Beginning This Period

2100.00

Transaction ID : SD9.5788

Amount Incurred This Period

0.00

Payment This Period

2100.00

Outstanding Balance at Close of This Period

0.00

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

Nature of Debt (Purpose):
 overpayment

Mailing Address Urb. Country Club
 1100 Carmen Busello St.

City State Zip Code
 San Juan PR 00924

Outstanding Balance Beginning This Period

100.01

Transaction ID : SD9.4979

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

100.01

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

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

100.01

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

100.01

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

0.00

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

100.01

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

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
Sami Abu Osba

Nature of Debt (Purpose):
Travel Expenses-Gasoline

Mailing Address Urb. San Agustin
1426 Luisa Capetilo St.

City State Zip Code
San Juan PR 00921

Outstanding Balance Beginning This Period
0.00

Transaction ID : SD10.7219

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
1357.34 0.00 1357.34

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

Nature of Debt (Purpose):
Professional Services - Communications Consultant

Mailing Address Urb. Roosevelt
Canals St. #451

City State Zip Code
San Juan PR 00918

Outstanding Balance Beginning This Period
1400.00

Transaction ID : SD10.5736

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 1400.00 0.00

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

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

Mailing Address Urb. Roosevelt
Canals St. #451

City State Zip Code
San Juan PR 00918

Outstanding Balance Beginning This Period
0.00

Transaction ID : SD10.7470

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
1400.00 0.00 1400.00

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

2757.34

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 Marilyn Almodovar Ponce	Nature of Debt (Purpose): Professional Services - Public Relations
Mailing Address Cond. Alborada Apt. 3732	
City State Zip Code San Juan PR 00959	

Outstanding Balance Beginning This Period 1400.00	Transaction ID : SD10.5737	
Amount Incurred This Period 0.00	Payment This Period 1400.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rafael Alomar Colon	Nature of Debt (Purpose): electrical wiring and switches installation - committee office
Mailing Address Cond. Vista Verde Apt. 601 San Ignacio Ave.	
City State Zip Code San Juan PR 00921	

Outstanding Balance Beginning This Period 197.14	Transaction ID : SD10.5017	
Amount Incurred This Period 0.00	Payment This Period 197.14	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Audio Visual Consultants Inc.	Nature of Debt (Purpose): Popular Democratic Party Convention-Technology rental
Mailing Address PO Box 5999	
City State Zip Code Caguas PR 00726	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.7193	
Amount Incurred This Period 3550.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3550.00

1) SUBTOTALS This Period This Page (optional)	3550.00
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
Karenin Biaggi Velazquez

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

Mailing Address Tintillo Gardens
 6 St. M-21

City State Zip Code
 Guaynabo PR 00966

Outstanding Balance Beginning This Period

Transaction ID : SD10.7202

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
Caguas Expressway Motors

Nature of Debt (Purpose):
 campaign vehicle rental

Mailing Address P.O Box 50045

City State Zip Code
 San Juan PR 00902

Outstanding Balance Beginning This Period

Transaction ID : SD10.5777

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
Luis Calderon Navarro

Nature of Debt (Purpose):
 hotel room expense

Mailing Address PO Box 315

City State Zip Code
 Loiza PR 00772

Outstanding Balance Beginning This Period

Transaction ID : SD10.5018

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

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

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
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406		
City Guaynabo	State PR	Zip Code 00968

Outstanding Balance Beginning This Period 6712.00	Transaction ID : SD10.4976	
Amount Incurred This Period 0.00	Payment This Period 1712.00	Outstanding Balance at Close of This Period 5000.00

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

Outstanding Balance Beginning This Period 18000.00	Transaction ID : SD10.5770	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 18000.00

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

1) SUBTOTALS This Period This Page (optional)	23150.00
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
Mailing Address Centro Intl de Mercadeo Torre 1 Suite 406		
City State	Zip Code	
Guaynabo PR	00968	

Outstanding Balance Beginning This Period	Transaction ID : SD10.7213	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="600.00"/>	<input type="text" value="0.00"/>	<input type="text" value="600.00"/>

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

Outstanding Balance Beginning This Period	Transaction ID : SD10.7214	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1200.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1200.00"/>

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

Outstanding Balance Beginning This Period	Transaction ID : SD10.7215	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2160.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2160.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="3960.00"/>
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 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	Transaction ID : SD10.7216	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2160.00"/>	<input type="text" value="0.00"/>	<input type="text" value="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	Transaction ID : SD10.7217	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2160.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2160.00"/>

C. 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	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="432.94"/>	<input type="text" value="0.00"/>	<input type="text" value="432.94"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="4752.94"/>
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 Pedro Clemente Quinones		Nature of Debt (Purpose): Campaign Jingle
Mailing Address Urb. Country Club 1100 Carmen Busello St.		
City State	Zip Code	
San Juan	PR 00924	

Outstanding Balance Beginning This Period	Transaction ID : SD10.4256	
<input type="text" value="-100.01"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="-100.01"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Compania de Teatros Coribantes, Inc.		Nature of Debt (Purpose): Popular Democratic Party Convention-Artistic services
Mailing Address Box 22998		
City State	Zip Code	
San Juan	PR 00931	

Outstanding Balance Beginning This Period	Transaction ID : SD10.7184	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="4600.00"/>	<input type="text" value="0.00"/>	<input type="text" value="4600.00"/>

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

Outstanding Balance Beginning This Period	Transaction ID : SD10.7477	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2000.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2000.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="6499.99"/>
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"/>

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <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 143 OF 150
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

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

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Facilities Management and Janitorial Services	Nature of Debt (Purpose): janitorial services - committee's offices
Mailing Address PO Box 366586	
City State Zip Code San Juan PR 00936-6586	

Outstanding Balance Beginning This Period 220.00	Transaction ID : SD10.5774	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 220.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carl Gibbs Acosta	Nature of Debt (Purpose): Professional Services - Statistical Consultant
Mailing Address Cape Village B-4 Buzon 110	
City State Zip Code Carolina PR 00979	

Outstanding Balance Beginning This Period 1965.00	Transaction ID : SD10.5738	
Amount Incurred This Period 0.00	Payment This Period 1965.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)	1447.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

Nature of Debt (Purpose):
Professional services- Statistics analyst

Mailing Address Cape Village B-4 Buzon 110

City State Zip Code
Carolina PR 00979

Outstanding Balance Beginning This Period
0.00

Transaction ID : SD10.7472

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
2000.00 0.00 2000.00

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

Nature of Debt (Purpose):
Professional services-Campaign director

Mailing Address Apartado 367746

City State Zip Code
San Juan PR 00936-7746

Outstanding Balance Beginning This Period
0.00

Transaction ID : SD10.7482

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
5000.00 0.00 5000.00

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

Nature of Debt (Purpose):
insurance premium

Mailing Address PO Box 9777

City State Zip Code
San Juan PR 00908-0777

Outstanding Balance Beginning This Period
565.02

Transaction ID : SD10.5754

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 65.92 499.10

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

7499.10

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 145 OF 150
	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 Importadora Espanola		Nature of Debt (Purpose): office furniture for Cox Alomar Committee
Mailing Address Corporate Office Park Road No. 20 Suite 500		
City State	Zip Code	
Guaynabo	PR 00966	

Outstanding Balance Beginning This Period	Transaction ID : SD10.5752	
<input type="text" value="2802.76"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="560.55"/>	<input type="text" value="2242.21"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Javier Lamboy		Nature of Debt (Purpose): Professional services- Assistant treasurer, Compliance advisory
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		
City State	Zip Code	
San Juan	PR 00917	

Outstanding Balance Beginning This Period	Transaction ID : SD10.7476	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2500.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lydias Restaurant		Nature of Debt (Purpose): Meals and beverages for fundraising event
Mailing Address Urb. Ls Caobos		
City	State	Zip Code
Ponce	PR	00717

Outstanding Balance Beginning This Period	Transaction ID : SD10.7197	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1643.25"/>	<input type="text" value="0.00"/>	<input type="text" value="1643.25"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="6385.46"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ernesto Morales Ramos		Nature of Debt (Purpose): Reimbursement of meals and gasoline expenses
Mailing Address 2 Cond. San Francisco VLG Apt. 109		
City State	Zip Code	
Carolina	PR 00987-6950	

Outstanding Balance Beginning This Period	Transaction ID : SD10.7186	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="107.03"/>	<input type="text" value="0.00"/>	<input type="text" value="107.03"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ernesto Morales Ramos		Nature of Debt (Purpose): Professional services- Media Advisor
Mailing Address 2 Cond. San Francisco VLG Apt. 109		
City State	Zip Code	
Carolina	PR 00987-6950	

Outstanding Balance Beginning This Period	Transaction ID : SD10.7475	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="4500.00"/>	<input type="text" value="0.00"/>	<input type="text" value="4500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor One Link Communications		Nature of Debt (Purpose): Office expenses-Telephone and internet services
Mailing Address PO Box 192296		
City State	Zip Code	
San Juan	PR 00919-2296	

Outstanding Balance Beginning This Period	Transaction ID : SD10.7203	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="628.11"/>	<input type="text" value="0.00"/>	<input type="text" value="628.11"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="5235.14"/>
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 Pitney Bowes		Nature of Debt (Purpose): equipment and postage meter rental
Mailing Address 362 Avenida de la Constitucion		
City	State	Zip Code
San Juan	PR	00901

Outstanding Balance Beginning This Period	Transaction ID : SD10.5772	
<input type="text" value="351.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="351.00"/>

B. 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="3660.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="915.00"/>	<input type="text" value="2745.00"/>

C. 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="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="305.00"/>	<input type="text" value="0.00"/>	<input type="text" value="305.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="3401.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor A. Miguel Rios	Nature of Debt (Purpose): Professional services-Sound vehicles for campaign activities.
Mailing Address Valles Verde II Ap-1 Rio Maravilla Street	
City State Zip Code Bayamon PR 00961	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.7196	
Amount Incurred This Period 3250.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3250.00

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

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.7471	
Amount Incurred This Period 2000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2000.00

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

Outstanding Balance Beginning This Period 1500.00	Transaction ID : SD10.5780	
Amount Incurred This Period 0.00	Payment This Period 1500.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)	5250.00
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 149 OF 150
	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 0.00	Transaction ID : SD10.7199	
Amount Incurred This Period 851.87	Payment This Period 0.00	Outstanding Balance at Close of This Period 851.87

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 0.00	Transaction ID : SD10.7473	
Amount Incurred This Period 1500.00	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 Edgardo Miguel Vazquez Rivera	Nature of Debt (Purpose): Professional Services - Issues Analyst
Mailing Address Tabonuco St. B-5 suite 216 PMB-112	
City State Zip Code Guaynabo PR 00968-3022	

Outstanding Balance Beginning This Period 2430.00	Transaction ID : SD10.5733	
Amount Incurred This Period 0.00	Payment This Period 2430.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)	2351.87
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 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 <input style="width:100%;" type="text" value="0.00"/>	Transaction ID : SD10.7474
Amount Incurred This Period <input style="width:100%;" type="text" value="2500.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="2500.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Vias Car Rental of PR	Nature of Debt (Purpose): vehicle rental for campaign events
Mailing Address Isla Verde	
City State Zip Code Carolina PR 00979	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="1045.15"/>	Transaction ID : SD10.4973
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="1045.15"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Vias Car Rental of PR	Nature of Debt (Purpose): Campaign vehicles rental.
Mailing Address Isla Verde	
City State Zip Code Carolina PR 00979	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	Transaction ID : SD10.7201
Amount Incurred This Period <input style="width:100%;" type="text" value="1803.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="1803.00"/>	

1) SUBTOTALS This Period This Page (optional) ▶	<input style="width:100%;" type="text" value="4303.00"/>
2) TOTALS This Period (last page this line number only) ▶	<input style="width:100%;" type="text" value="82173.64"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	<input style="width:100%;" type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%;" type="text" value="82173.64"/>