

# 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

<b>1. NAME OF COMMITTEE IN FULL</b> COX ALOMAR 2012 INC			
ADDRESS (number and street) 403 AVENIDA CONSTITUCION			
CITY, STATE, and ZIP CODE SAN JUAN PR 00906			
<b>2. NAME OF CANDIDATE</b> Rafael Cox Alomar		<b>3. OFFICE SOUGHT</b> (State and District) House PR 00	
<b>4. FEC IDENTIFICATION NUMBER</b> C00506212			
<b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
<b>A. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> Sergio L. Chevere Mourino Urb. El Monte 3166 Marbella St. Ponce PR 00716-4808			
Name of Employer Primary Medical Group		Date (month, day, year) 10/23/2012	Amount 2500.00
<b>Transaction ID : F6.9918</b>			
Occupation Physician			
<b>B. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> Iraida Del Rio Rodriguez El Monte 3166 3166 Marbella St. Ponce PR 00716			
Name of Employer Primary Medical Group		Date (month, day, year) 10/23/2012	Amount 2500.00
<b>Transaction ID : F6.9913</b>			
Occupation Doctor			
<b>C. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> Juan R. Diaz Troche Road 351 # 3230 Mayaguez PR 00682			
Name of Employer self employed		Date (month, day, year) 10/24/2012	Amount 1000.00
<b>Transaction ID : F6.9920</b>			
Occupation Surgeon			
<b>D. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> Ana Lopez PO Box 3146 Mayaguez PR 00681			
Name of Employer Unemployed		Date (month, day, year) 10/22/2012	Amount 1000.00
<b>Transaction ID : F6.9906</b>			
Occupation Homemaker			
<b>E. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> Cesar Miranda PO Box 9022534 San Juan PR 00902-2534			
Name of Employer		Date (month, day, year) 10/22/2012	Amount 1000.00
<b>Transaction ID : F6.9908</b>			
Occupation			
<b>SIGNATURE (optional)</b> Javier J Lamboy Hernandez  <i>[Electronically Filed]</i>		<b>DATE</b> 10/24/2012	<b>For further information contact:</b> Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

## FEC FORM 6

(Revised 07/2011)

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<b>ADDRESS</b> (number and street) 403 AVENIDA CONSTITUCION			
<b>CITY, STATE, and ZIP CODE</b> SAN JUAN PR 00906			
<b>2. NAME OF CANDIDATE</b> Rafael Cox Alomar	<b>3. OFFICE SOUGHT</b> (State and District) House PR 00	<b>4. FEC IDENTIFICATION NUMBER</b> C00506212	
<b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
<b>A. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> Jose Sobrino Catoni  Tore San Pablo Suite 503  Bayamon PR 00961	Name of Employer self employed  <b>Transaction ID : F6.9915</b> Occupation Physician	Date (month, day, year) 10/23/2012	Amount 1000.00
<b>B. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>	Name of Employer  Occupation	Date (month, day, year)	Amount
<b>C. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>	Name of Employer  Occupation	Date (month, day, year)	Amount
<b>D. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>	Name of Employer  Occupation	Date (month, day, year)	Amount
<b>E. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>	Name of Employer  Occupation	Date (month, day, year)	Amount