

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

COX ALOMAR 2012 INC

ADDRESS (number and street)

403 AVENIDA CONSTITUCION

Check if different than previously reported. (ACC)

SAN JUAN

PR

00906

2. FEC IDENTIFICATION NUMBER ▼

C C00506212

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

PR

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

MM / DD / YYYY
11 / 06 / 2012

DD / YYYY

YYYY

in the State of

PR

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

MM / DD / YYYY

DD / YYYY

YYYY

in the State of

5. Covering Period

MM / DD / YYYY
10 / 01 / 2012

DD / YYYY

YYYY

through

MM / DD / YYYY
10 / 17 / 2012

DD / YYYY

YYYY

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

Type or Print Name of Treasurer Javier J Lamboy Hernandez

Signature of Treasurer Javier J Lamboy Hernandez

[Electronically Filed]

Date

MM / DD / YYYY
10 / 25 / 2012

DD / YYYY

YYYY

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 57

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))....	51051.20	663728.50
(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)).....	51051.20	663728.50
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	53660.55	601994.31
(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)).....	53660.55	601994.31
8. Cash on Hand at Close of Reporting Period (from Line 27).....	56988.30	
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).....	145701.30	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

COX ALOMAR 2012 INC

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2012 To: M M / D D / Y Y Y Y 10 / 17 / 2012

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).....	34248.76	432862.97
(ii) Unitemized.....	16802.44	227365.53
(iii) TOTAL of contributions from individuals ▶	51051.20	660228.50
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	3500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	51051.20	663728.50
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	2100.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	51051.20	665828.50

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	53660.55	601994.31
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	435.66	6845.89
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	54096.21	608840.20

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	60033.31
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	51051.20
25. SUBTOTAL (add Line 23 and Line 24).....	111084.51
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	54096.21
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	56988.30

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

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

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Roberto H Baez Torres		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 03 / 2012
Mailing Address Cond. Harbor Plaza Apt. # 105 105 Gilberto Concepcion de Gracia		Transaction ID : SA11AI.10001
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
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 625.00	

Full Name (Last, First, Middle Initial) B. Dennis Bechara		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 03 / 2012
Mailing Address PO Box 1194		Transaction ID : SA11AI.10033
City Mayaguez	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) C. Dennis Bechara		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address PO Box 1194		Transaction ID : SA11AI.9880
City Mayaguez	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 900.00	

SUBTOTAL of Receipts This Page (optional).....	825.00
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 6 OF 57
	<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)
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 unemployed Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

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

Transaction ID : SA11AI.9955

Amount of Each Receipt this Period
100.00

B. 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 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
10 / 05 / 2012

Transaction ID : SA11AI.9899

Amount of Each Receipt this Period
400.00

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

Mailing Address Calle 5 de octubre # 9

City Santa Isabel State PR Zip Code 00757

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
950.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2012

Transaction ID : SA11AI.9930

Amount of Each Receipt this Period
100.00

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 7 OF 57
(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)
Olga Borges Rivera

Mailing Address PO Box 178

City State Zip Code
Mayaguez PR 00681-0178

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

Name of Employer Occupation

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
10 / 07 / 2012

Transaction ID : SA11AI.10049

Amount of Each Receipt this Period
200.00

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

Mailing Address PO Box 667

City State Zip Code
Humacao PR 00792

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

Name of Employer Occupation
Lawyer

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
10 / 11 / 2012

Transaction ID : SA11AI.10004

Amount of Each Receipt this Period
125.00

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

Mailing Address P.O. Box 3146

City State Zip Code
Mayaguez PR 00681-3146

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

Name of Employer Occupation
self-employed Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2486.78

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 12 / 2012

Transaction ID : SA11AI.10079

Amount of Each Receipt this Period
500.00

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

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

825.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 57
	<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)
Yovani Colon Gerena

Mailing Address **G-7 Yagrumo St.**
Caparra Hills

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

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

Name of Employer **Colon Gerena & Associates** Occupation **Human Resources Advisor**

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
10 / 05 / 2012

Transaction ID : SA11AI.10259

Amount of Each Receipt this Period
500.00

Contribution via rafaelcoxalomar.com (ACH)

B. 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
4386.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 01 / 2012

Transaction ID : SA11AI.9961

Amount of Each Receipt this Period
525.00

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
4636.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 14 / 2012

Transaction ID : SA11AI.10003

Amount of Each Receipt this Period
250.00

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

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

1275.00

**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 57
	<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)
Wilfredo Cubero Soto

Mailing Address P.O. Box 3919

City State Zip Code
Mayaguez PR 00681

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

Name of Employer Occupation

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
10 / 05 / 2012

Transaction ID : SA11AI.10035

Amount of Each Receipt this Period
200.00

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

Mailing Address Road 351 # 3230

City State Zip Code
Mayaguez PR 00682

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

Name of Employer Occupation
self employed Surgeon

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2900.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 13 / 2012

Transaction ID : SA11AI.10064

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Ileana I Fas Pacheco

Mailing Address 701 Ponce de Leon Ave. Apt. 309

City State Zip Code
San Juan PR 00907

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

Name of Employer Occupation
Martinal Corp. Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
625.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : SA11AI.9888

Amount of Each Receipt this Period
500.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 57
	<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. Diana Fernandez		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address Fajardo Pueblo 316 Pachecho General St.		Transaction ID : SA11AI.9889
City Fajardo	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. James Fox Acevedo		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 08 / 2012
Mailing Address PO Box 3003		Transaction ID : SA11AI.10041
City Mayaguez	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00	

Full Name (Last, First, Middle Initial) C. Fundraising at Rancho Pepe		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 06 / 2012
Mailing Address Haciendas del Rey Bo. Tomas D Castro Sector Macanea		Transaction ID : SA11AI.10112
City Caguas	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7228.00 Contributions of \$20 per person
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7228.00	

SUBTOTAL of Receipts This Page (optional).....	7678.00
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 57
	<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. Angel Garcia Bonilla		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address Miramar Embassy 902 Ponce de Leon St. Apt. 203		Transaction ID : SA11AI.9965	
City San Juan State PR Zip Code 00907	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed Occupation Engineer		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) B. Robert Gonzalez Fernandez		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 03 / 2012	
Mailing Address PMB 331 PO Box 70344		Transaction ID : SA11AI.10002	
City San Juan State PR Zip Code 00936	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Name of Employer self employed Occupation Physician		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 550.00		

Full Name (Last, First, Middle Initial) C. Elsie LA Herger		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address Cond. Candina One 1 Candina St. Apt. 2		Transaction ID : SA11AI.10188	
City San Juan State PR Zip Code 00907	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00		

SUBTOTAL of Receipts This Page (optional).....	1350.00
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 12 OF 57
	<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)
Edgardo Hernandez Lopez

Mailing Address Urb. Parana
S9 5th Street

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
10 / 16 / 2012

Transaction ID : SA11AI.9894

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Wilfredo Irizarry Ruperto

Mailing Address PO Box 3686

City Mayaguez State PR Zip Code 00681

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 13 / 2012

Transaction ID : SA11AI.10070

Amount of Each Receipt this Period
300.00

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

Mailing Address PO Box 1856

City Mayaguez State PR Zip Code 00681

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

Name of Employer Self-Employed Occupation MD

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
10 / 08 / 2012

Transaction ID : SA11AI.10023

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

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
Ramon Leduc Marquez

Mailing Address 8169 Concordia St. Suite 106
Cond. San Vicente

City Ponce State PR Zip Code 00717

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

Name of Employer Appraiser Occupation Banco Santander

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
 10 / 14 / 2012

Transaction ID : SA11AI.9928

Amount of Each Receipt this Period
500.00

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

Mailing Address 26 Washington St.
Apt. 2

City San Juan State PR Zip Code 00907

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

Name of Employer Pietrantonì, Mendez & Alvarez Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
495.76

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2012

Transaction ID : SA11AI.10271

Amount of Each Receipt this Period
495.76

In-kind - Fundraising Expenses-Beverages

C. Full Name (Last, First, Middle Initial)
Maria Mendez Matta

Mailing Address 4011 Paseo La Catalana
Haciendas Monte, Coto Laurel 6

City Coto Laurel State PR Zip Code 00780

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
800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2012

Transaction ID : SA11AI.9877

Amount of Each Receipt this Period
800.00

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

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

1795.76

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

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

FOR LINE NUMBER: PAGE 14 OF 57
(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)
Manuel Moreda Toledo

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 Occupation
McCconnell & Valdes LLC 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
 10 / 01 / 2012

Transaction ID : SA11AI.10159

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Marya Munoz Vazquez

Mailing Address Park Boulevard 310
2305 Laurel St.

City San Juan State PR Zip Code 00913

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
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2012

Transaction ID : SA11AI.10195

Amount of Each Receipt this Period
200.00

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

Mailing Address Las Violetas 2003

City San Juan State PR Zip Code 00915

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

Name of Employer Occupation

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
 10 / 05 / 2012

Transaction ID : SA11AI.9898

Amount of Each Receipt this Period
250.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 57
	<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)
Ruddy Oquendo

Mailing Address PO Box 8389

City Humacao State PR Zip Code 00792-8389

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 **925.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 12 / 2012

Transaction ID : SA11AI.9997

Amount of Each Receipt this Period
125.00

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

Mailing Address Torrimar Bambu K-4

City Guaynabo State PR Zip Code 00966

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

Name of Employer Unemployed Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2012

Transaction ID : SA11AI.10034

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Margarita Ostolaza Bey

Mailing Address Urb. Ocean Park
4 Elena St.

City San Juan State PR Zip Code 00911-1410

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
 10 / 01 / 2012

Transaction ID : SA11AI.10189

Amount of Each Receipt this Period
300.00

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

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

625.00

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

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

FOR LINE NUMBER: PAGE 16 OF 57
(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)
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
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2012

Transaction ID : SA11AI.10150

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Jesus R. Rabell Mendez

Mailing Address PO Box 195580

City San Juan State PR Zip Code 00919-5580

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2012

Transaction ID : SA11AI.10145

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mayra J. Ramirez

Mailing Address Paseo Los Robles
1909 Jose Sabater St.

City Mayaguez State PR Zip Code 00682-7909

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
324.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 12 / 2012

Transaction ID : SA11AI.10046

Amount of Each Receipt this Period
200.00

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 57
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

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

Mailing Address 554 Perseo St. Apt 1101

City San Juan State PR Zip Code 00920

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

Name of Employer unemployed Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2012

Transaction ID : SA11AI.10250

Amount of Each Receipt this Period
100.00

Contribution via rafaelcoxalomar.com (ACH)

B. Full Name (Last, First, Middle Initial)
Julio Rivera Toro

Mailing Address Paseo del Rey Apr. 1503

City Ponce State PR Zip Code 00716

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
 10 / 14 / 2012

Transaction ID : SA11AI.9937

Amount of Each Receipt this Period
250.00

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

Mailing Address 116 San Pablo St.
Urb. Horalsón

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
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 09 / 2012

Transaction ID : SA11AI.9975

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 18 OF 57
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

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

Mailing Address 14 Barcelo St.

City Barranquitas State PR Zip Code 00794

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

Name of Employer Farmacia Pedraza Occupation Pharmacist

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
 10 / 03 / 2012

Transaction ID : SA11AI.9887

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Pablo R. Rodriguez Torrech

Mailing Address 105 Ave Ortegon
Cond. Caparra Classic 501

City Guaynabo State PR Zip Code 00966

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2012

Transaction ID : SA11AI.10194

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Freddie H. Roman Aviles

Mailing Address 14 Peral St. N
suite 1-E

City Mayaguez State PR Zip Code 00680

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

Name of Employer Occupation

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
 10 / 13 / 2012

Transaction ID : SA11AI.10038

Amount of Each Receipt this Period
200.00

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

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

1400.00

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

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

FOR LINE NUMBER: PAGE 19 OF 57
(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)
Jesus Romero Perez

Mailing Address PO Box 4129

City Mayaguez State PR Zip Code 00681-4129

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 **1100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2012

Transaction ID : SA11AI.10065

Amount of Each Receipt this Period
400.00

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

Mailing Address P.O. Box 470

City Mayaguez State PR Zip Code 00681

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1290.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2012

Transaction ID : SA11AI.10074

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Jorge L. Sanchez Colon

Mailing Address Chalets de Santa Maria # 24

City San Juan State PR Zip Code 00927

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 **4200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2012

Transaction ID : SA11AI.9879

Amount of Each Receipt this Period
1700.00

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

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

2200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 57
	<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. Angel L. Santana		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 10 / 2012
Mailing Address PO Box 8582		Transaction ID : SA11AI.9998
City Humacao	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Self-Employed	Occupation Businessman	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1325.00	

Full Name (Last, First, Middle Initial) B. Monserrate Santiago Rodriguez		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 01 / 2012
Mailing Address Merida Street 1686 Venus Gardens		Transaction ID : SA11AI.9964
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer 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) C. Margarita Suarez		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 13 / 2012
Mailing Address Washington St. #57 2nd floor		Transaction ID : SA11AI.10082
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 University	Occupation student	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

SUBTOTAL of Receipts This Page (optional).....	1225.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 21 OF 57
(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)
Margarita O. Suarez Noya

Mailing Address Cond. Tenerife 1507
Ashford Ave. Apt. 102

City San Juan State PR Zip Code 00911

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
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : SA11AI.10083

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Conchita Toro Rivera

Mailing Address PO Box 4207

City Mayaguez State PR Zip Code 00681

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2012

Transaction ID : SA11AI.9882

Amount of Each Receipt this Period
300.00

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

Mailing Address PO Box 11363

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
2500.00

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

Transaction ID : SA11AI.9978

Amount of Each Receipt this Period
2500.00

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

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

5300.00

**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 57
	<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)
Enrique J. Vila Biaggi

Mailing Address Urb. Torrimar

City State Zip Code
I-7 Alhambra St. PR 00966

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

Name of Employer Occupation
self-employed Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3100.00

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

Transaction ID : SA11AI.9977

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Enrique Vila del Corral

Mailing Address PO Box 11363

City State Zip Code
San Juan PR 00922-1363

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

Name of Employer Occupation
Vila del Corral and Company Vice President - CPA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

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

Transaction ID : SA11AI.9974

Amount of Each Receipt this Period
1000.00

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).....

3500.00

34248.76

**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 23 OF 57	
	<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 10 / 04 / 2012
Mailing Address Loiza St. # 1603		Amount of Each Disbursement this Period
City Santurce	State PR	Zip Code 00911
Purpose of Disbursement Office Materials	Category/Type 001	
Candidate Name	Transaction ID : SB17.10116	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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
B. AMAS Rental		M M / D D / Y Y Y Y 10 / 05 / 2012
Mailing Address Urb. Estancias del Bosque 801 Robles Dt.		Amount of Each Disbursement this Period
City Cidra	State PR	Zip Code 00739
Purpose of Disbursement Fundraising Expenses- Rentals	Category/Type 003	
Candidate Name	Transaction ID : SB17.10104	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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. Luis Calderon Navarro		M M / D D / Y Y Y Y 10 / 02 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period
City Loiza	State PR	Zip Code 00772
Purpose of Disbursement Field Operations Expenses	Category/Type 007	
Candidate Name	Transaction ID : SB17.10117	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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).....	2104.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 57			
	<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 10 / 05 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 780.00 Transaction ID : SB17.10093
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Field Operations Expenses	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
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 10 / 09 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 172.40 Transaction ID : SB17.10108
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Reimbursement	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 10 / 09 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 590.00 Transaction ID : SB17.10114
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Field Operations Expenses	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1542.40
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 25 OF 57			
	<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 10 / 09 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 3550.00
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Field Operations Expenses	Transaction ID : SB17.10115
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. Luis Calderon Navarro		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2012
Mailing Address PO Box 315		Amount of Each Disbursement this Period 880.00
City Loiza	State PR	
Zip Code 00772	Purpose of Disbursement Field Operations Expenses	Transaction ID : SB17.9358
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. Iris Cancio Cruz		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address Urb. Punto Oro 4541 Golondrina St.		Amount of Each Disbursement this Period 2440.00
City Ponce	State PR	
Zip Code 00728	Purpose of Disbursement Salary	Transaction ID : SB17.10092
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6870.00
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 26 OF 57			
	<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. Catering Express

Mailing Address 12 Manuel Malave St.

City Anasco State PR Zip Code 00610

Purpose of Disbursement Fundraisinf=g Expenses-Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 13 / 2012

Amount of Each Disbursement this Period: 875.00

Transaction ID : SB17.10098

Category/Type: 003

Full Name (Last, First, Middle Initial)
B. Center Tech Comm. Inc.

Mailing Address PO Box 1253

City Cidra State PR Zip Code 00739

Purpose of Disbursement Field Operations Expenses-Radios

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 09 / 2012

Amount of Each Disbursement this Period: 470.80

Transaction ID : SB17.10096

Category/Type: 007

Full Name (Last, First, Middle Initial)
c. Jose Cruz

Mailing Address PO Box 443

City Juncos State PR Zip Code 00777

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 03 / 2012

Amount of Each Disbursement this Period: 1860.00

Transaction ID : SB17.10126

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 3205.80

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 57	
	<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 10 / 03 / 2012
Mailing Address PO Box 367921		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.10130
City San Juan	State PR	
Zip Code 00936-7921	Purpose of Disbursement Reimbursement	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Ivelisse De Jesus		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2012
Mailing Address PO Box 367921		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.10089
City San Juan	State PR	
Zip Code 00936-7921	Purpose of Disbursement Reimbursement	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Carl Gibbs Acosta		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address Cape Village B-4 Buzon 110		Amount of Each Disbursement this Period 1860.00 Transaction ID : SB17.10133
City Carolina	State PR	
Zip Code 00979	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2860.00
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 28 OF 57	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Richard Guzman Rivera		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2012
Mailing Address 112 Paris St. Urb. Floral Park		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.10102
City Hato Rey	State PR Zip Code 00917	
Purpose of Disbursement Field Operations Expenses-Vehicle Rental		Category/Type 007
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Richard Guzman Rivera		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2012
Mailing Address 112 Paris St. Urb. Floral Park		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.10137
City Hato Rey	State PR Zip Code 00917	
Purpose of Disbursement Field Operations Expenses-Vehicle Rental		Category/Type 007
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Miguel Hernandez Agosto		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address Apartado 367746		Amount of Each Disbursement this Period 4650.00 Transaction ID : SB17.10088
City San Juan	State PR Zip Code 00936-7746	
Purpose of Disbursement Salary		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7350.00
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 29 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Gabriel Laborde		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address Urb. Rio Piedras Heights Tinto Street 1679		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.10136
City San Juan	State PR Zip Code 00926	
Purpose of Disbursement Reimbursements	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Javier J Lamboy Hernandez		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		Amount of Each Disbursement this Period 2790.00 Transaction ID : SB17.10123
City San Juan	State PR Zip Code 00917	
Purpose of Disbursement Salary	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Luis Lopez Valdes		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 26 Washington St. Apt. 2		Amount of Each Disbursement this Period 495.76 Transaction ID : SB17.10272
City San Juan	State PR Zip Code 00907	
Purpose of Disbursement In-kind - Fundraising Expenses-Beverages	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4035.76
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 30 OF 57			
	<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. Los Bizcochos Catering		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2012
Mailing Address PO Box 2017 PMB 192		Amount of Each Disbursement this Period 1350.00 Transaction ID : SB17.10106
City Las Piedras	State PR	
Zip Code 00771	Purpose of Disbursement Fundraising Expenses-Meals	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Israel Morales Alicea		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address Terranova 4B9 St.		Amount of Each Disbursement this Period 1860.00 Transaction ID : SB17.10134
City Guaynabo	State PR	
Zip Code 00969	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Ernesto Morales Ramos		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address 2 Cond. San Francisco VLG Apt. 109		Amount of Each Disbursement this Period 3022.50 Transaction ID : SB17.10125
City Carolina	State PR	
Zip Code 00987-6950	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	6232.50
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 31 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Ernesto Morales Ramos		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 2 Cond. San Francisco VLG Apt. 109		Amount of Each Disbursement this Period 3200.00 Transaction ID : SB17.10131
City Carolina	State PR	
Zip Code 00987-6950	Purpose of Disbursement Ads Recording	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Ivonne Otero Santiago		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2012
Mailing Address Calle 2 #77 Urb. Paseo Alto		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.10124
City San Juan	State PR	
Zip Code 00926	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Alexis Ramirez		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2012
Mailing Address Bonneville Heights Puerto Rico Ave. 13		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.10110
City Caguas	State PR	
Zip Code 00725	Purpose of Disbursement Fundraising Expenses-Music	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Restaurante Antonio		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2012
Mailing Address 1406 Magdalena Ave.		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.10100
City San Juan State PR Zip Code 00907	Purpose of Disbursement Fundraising Expenses-Meals 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:	

Full Name (Last, First, Middle Initial) B. A. Miguel Rios		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2012
Mailing Address Valle Verde II Ap-1 Rio Maravilla Street		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB17.10103
City Bayamon State PR Zip Code 00961	Purpose of Disbursement Field Operations Expensenes-Sound Vehicle Rental Candidate Name Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. A. Miguel Rios		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2012
Mailing Address Valle Verde II Ap-1 Rio Maravilla Street		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB17.10095
City Bayamon State PR Zip Code 00961	Purpose of Disbursement Field Operations Expensenes-Sound Vehicle Rental Candidate Name Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6200.00
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 33 OF 57	
	<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 10 / 02 / 2012
Mailing Address Cond. Torre de los Frailes Apt. 11 J		Amount of Each Disbursement this Period 1860.00 Transaction ID : SB17.10101
City Guaynabo State PR Zip Code 00969	Purpose of Disbursement Salary Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Blanca Salinas		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address		Amount of Each Disbursement this Period 260.00 Transaction ID : SB17.10118
City State Zip Code	Purpose of Disbursement Fundraising Expenses-Meals Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Christopher Sanchez Ortiz		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address PO Box 194555		Amount of Each Disbursement this Period 1627.00 Transaction ID : SB17.10127
City San Juan State PR Zip Code 00919	Purpose of Disbursement Salary Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3747.00
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 34 OF 57			
	<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. San Expedito		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2012
Mailing Address 166 Santiago R. Palmer East		Amount of Each Disbursement this Period 661.42 Transaction ID : SB17.10090
City Mayaguez	State PR	
Zip Code 00680	Purpose of Disbursement Fundraising Expenses-Beverages	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Nilda Soto Mejias		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address Cond. Caguas Tower Apt 1107		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.10135
City Caguas	State PR	
Zip Code 00725	Purpose of Disbursement Reimbursement	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Nilda Soto Mejias		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2012
Mailing Address Cond. Caguas Tower Apt 1107		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.10094
City Caguas	State PR	
Zip Code 00725	Purpose of Disbursement Fundraising Expenses-Beverages	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1401.42
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 35 OF 57	
	<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 10 / 03 / 2012	
Mailing Address Tabonuco St. B-5 suite 216 PMB-112			Amount of Each Disbursement this Period 2325.00	
City Guaynabo	State PR	Zip Code 00968-3022	Transaction ID : SB17.10132	
Purpose of Disbursement Salary		Category/Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B.			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:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		Category/Type		
Candidate Name				
Office Sought:	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).....	2325.00
TOTAL This Period (last page this line number only).....	53224.78

**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 36 OF 57	
	<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 10 / 01 / 2012
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 120.13 Transaction ID : SB21.10278
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Bank Fees	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. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 34.13 Transaction ID : SB21.10279
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Bank Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 81.40 Transaction ID : SB21.10280
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Comm. SVC 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	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	235.66
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 37 OF 57	
	<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 10 / 17 / 2012
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 200.00
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Deposited check returned	Transaction ID : SB21.10281
Candidate Name	012 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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	435.66

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

Mailing Address Urb. Country Club
 1100 Carmen Busello St.

City State Zip Code
 San Juan PR 00924

Nature of Debt (Purpose):
 overpayment

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

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

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

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

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 39 OF 57
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sami Abu Osba		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 <input type="text" value="1357.34"/>	Transaction ID : SD10.7219	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1357.34"/>

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

Outstanding Balance Beginning This Period <input type="text" value="1970.00"/>	Transaction ID : SD10.9851	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1970.00"/>

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

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.9850	
Amount Incurred This Period <input type="text" value="1970.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1970.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="5297.34"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

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

Mailing Address Urb. Roosevelt
Canals St. #451

City State Zip Code
San Juan PR 00918

Outstanding Balance Beginning This Period

1400.00

Transaction ID : SD10.7470

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1400.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Audio Visual Consultants Inc.

Nature of Debt (Purpose):
Popular Democratic Party Convention-
Technology rental

Mailing Address PO Box 5999

City State Zip Code
Caguas PR 00726

Outstanding Balance Beginning This Period

3550.00

Transaction ID : SD10.7193

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3550.00

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

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

Mailing Address Tintillo Gardens
6 St. M-21

City State Zip Code
Guaynabo PR 00966

Outstanding Balance Beginning This Period

1500.00

Transaction ID : SD10.7202

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

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

6450.00

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 41 OF 57
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Caguas Expressway Motors		Nature of Debt (Purpose): Car Rental
Mailing Address P.O Box 50045		
City	State	Zip Code
San Juan	PR	00902

Outstanding Balance Beginning This Period	Transaction ID : SD10.9862	
<input type="text" value="1460.00"/>		
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="1460.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Luis Calderon Navarro		Nature of Debt (Purpose): hotel room expense
Mailing Address PO Box 315		
City	State	Zip Code
Loiza	PR	00772

Outstanding Balance Beginning This Period	Transaction ID : SD10.5018	
<input type="text" value="130.80"/>		
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="130.80"/>

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

Outstanding Balance Beginning This Period	Transaction ID : SD10.4976	
<input type="text" value="5000.00"/>		
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="5000.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="6590.80"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Central 12

Nature of Debt (Purpose):
Advertising Consulting Services

Mailing Address Centro Intl de Mercadeo Torre 1
Suite 406

City State Zip Code
Guaynabo PR 00968

Outstanding Balance Beginning This Period
18000.00

Transaction ID : SD10.5770

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 18000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Central 12

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
150.00

Transaction ID : SD10.7212

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 150.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Central 12

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
600.00

Transaction ID : SD10.7213

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 600.00

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

18750.00

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

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

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

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

Outstanding Balance Beginning This Period 2160.00	Transaction ID : SD10.7215	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2160.00

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

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

1) SUBTOTALS This Period This Page (optional)	5520.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="2160.00"/>	Transaction ID : SD10.7217
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	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="2160.00"/>	

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

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="432.94"/>	Transaction ID : SD10.7208
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	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="432.94"/>	

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

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="-100.01"/>	Transaction ID : SD10.4256
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	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="-100.01"/>	

1) SUBTOTALS This Period This Page (optional) ▶	<input style="width:100%;" type="text" value="2492.93"/>
2) TOTALS This Period (last page this line number only) ▶	<input style="width:100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	<input style="width:100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%;" type="text"/>

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

Form/Schedule: SD10

Transaction ID : SD10.4256

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

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 46 OF 57
	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 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="4600.00"/>		
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="4600.00"/>

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

Outstanding Balance Beginning This Period	Transaction ID : SD10.7477	
<input type="text" value="2000.00"/>		
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="2000.00"/>

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

Outstanding Balance Beginning This Period	Transaction ID : SD10.9854	
<input type="text" value="2000.00"/>		
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="2000.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="8600.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 47 OF 57
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Facilities Management and Janitorial Services	Nature of Debt (Purpose): janitorial services - committee's offices
Mailing Address PO Box 366586	
City State Zip Code San Juan PR 00936-6586	

Outstanding Balance Beginning This Period 220.00	Transaction ID : SD10.5774	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 220.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carl Gibbs Acosta	Nature of Debt (Purpose): Professional services- Statistics analyst
Mailing Address Cape Village B-4 Buzon 110	
City State Zip Code Carolina PR 00979	

Outstanding Balance Beginning This Period 2000.00	Transaction ID : SD10.7472	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2000.00

1) SUBTOTALS This Period This Page (optional)	3447.00
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 48 OF 57
	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 Carl Gibbs Acosta	Nature of Debt (Purpose): Salary
Mailing Address Cape Village B-4 Buzon 110	
City State Zip Code Carolina PR 00979	

Outstanding Balance Beginning This Period 2000.00	Transaction ID : SD10.9855	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2000.00

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

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.10276	
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 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 5000.00	Transaction ID : SD10.7482	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

1) SUBTOTALS This Period This Page (optional)	8500.00
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
Miguel Hernandez Agosto

Nature of Debt (Purpose):
Salary

Mailing Address Apartado 367746

City State Zip Code
San Juan PR 00936-7746

Outstanding Balance Beginning This Period

5000.00

Transaction ID : SD10.9858

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

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

499.10

Transaction ID : SD10.5754

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

499.10

C. 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

2242.21

Transaction ID : SD10.5752

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2242.21

- 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) ▶

7741.31

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 50 OF 57
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Javier J Lamboy Hernandez		Nature of Debt (Purpose): Professional services- Assistant treasurer, Compliance advisory
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		
City State	Zip Code	
San Juan	PR 00917	

Outstanding Balance Beginning This Period	Transaction ID : SD10.7476	
<input type="text" value="2500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Javier J Lamboy Hernandez		Nature of Debt (Purpose): Salary
Mailing Address Carmen St. # 5 Isabelle Bldg Apt # 2		
City State	Zip Code	
San Juan	PR 00917	

Outstanding Balance Beginning This Period	Transaction ID : SD10.9853	
<input type="text" value="3000.00"/>		
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="3000.00"/>

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="1643.25"/>		
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="1643.25"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="7143.25"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Israel Morales Alicea

Mailing Address Terranova 4B9 St.

City State Zip Code
Guaynabo PR 00969

Nature of Debt (Purpose):
Salary

Outstanding Balance Beginning This Period **2000.00** Transaction ID : **SD10.9860**

Amount Incurred This Period **0.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **2000.00**

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

Mailing Address 2 Cond. San Francisco VLG Apt. 109

City State Zip Code
Carolina PR 00987-6950

Nature of Debt (Purpose):
Reimbursement of meals and gasoline expenses

Outstanding Balance Beginning This Period **107.03** Transaction ID : **SD10.7186**

Amount Incurred This Period **0.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **107.03**

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

Mailing Address 2 Cond. San Francisco VLG Apt. 109

City State Zip Code
Carolina PR 00987-6950

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

Outstanding Balance Beginning This Period **4500.00** Transaction ID : **SD10.7475**

Amount Incurred This Period **0.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **4500.00**

1) SUBTOTALS This Period This Page (optional)	6607.03
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 52 OF 57
	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 Ernesto Morales Ramos		Nature of Debt (Purpose): Salary
Mailing Address 2 Cond. San Francisco VLG Apt. 109		
City State	Zip Code	
Carolina PR	00987-6950	

Outstanding Balance Beginning This Period	Transaction ID : SD10.9856	
3250.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	3250.00

B. 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	
628.11		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	628.11

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ivonne Otero Santiago		Nature of Debt (Purpose): Salary
Mailing Address Calle 2 #77 Urb. Paseo Alto		
City State	Zip Code	
San Juan PR	00926	

Outstanding Balance Beginning This Period	Transaction ID : SD10.9859	
2140.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	2140.00

1) SUBTOTALS This Period This Page (optional)	6018.11
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 53 OF 57
	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 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 351.00	Transaction ID : SD10.5772	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 351.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Restaurante Antonio	Nature of Debt (Purpose): Fundraising Expenses
Mailing Address 1406 Magdalena Ave.	
City State Zip Code San Juan PR 00907	

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

C. 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 2745.00	Transaction ID : SD10.4971	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2745.00

1) SUBTOTALS This Period This Page (optional)	4096.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Ricoh PR

Mailing Address National Plaza Bldg suite 1700
431 Ponce de Leon Ave.

City State Zip Code
San Juan PR 00917

Nature of Debt (Purpose):
Office expenses-Printing services

Outstanding Balance Beginning This Period **Transaction ID : SD10.7204**
305.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 305.00

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

Mailing Address Valle Verde II
Ap-1 Rio Maravilla Street

City State Zip Code
Bayamon PR 00961

Nature of Debt (Purpose):
Professional services-Sound vehicles for campaign activities.

Outstanding Balance Beginning This Period **Transaction ID : SD10.7196**
3250.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 3250.00

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

Mailing Address Valle Verde II
Ap-1 Rio Maravilla Street

City State Zip Code
Bayamon PR 00961

Nature of Debt (Purpose):
Rental_Sound Vehicle

Outstanding Balance Beginning This Period **Transaction ID : SD10.9849**
11700.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 11700.00

1) SUBTOTALS This Period This Page (optional)	▶	15255.00
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 A. Miguel Rios		Nature of Debt (Purpose): Sound Vehicle Rental
Mailing Address Valles Verde II Ap-1 Rio Maravilla Street		
City Bayamon	State PR	Zip Code 00961

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.10273	
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 serices- Fundraiser coordinator
Mailing Address Cond. Torre de los Frailes Apt. 11 J		
City Guaynabo	State PR	Zip Code 00969

Outstanding Balance Beginning This Period 2000.00	Transaction ID : SD10.7471	
Amount Incurred This Period 0.00	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): Reimburstments for travel and meal expenses.
Mailing Address PO Box 194555		
City San Juan	State PR	Zip Code 00919

Outstanding Balance Beginning This Period 851.87	Transaction ID : SD10.7199	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 851.87

1) SUBTOTALS This Period This Page (optional)	6101.87
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)	PAGE 56 OF 57
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

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

Outstanding Balance Beginning This Period 1500.00	Transaction ID : SD10.7473	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

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

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

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

Outstanding Balance Beginning This Period 2500.00	Transaction ID : SD10.7474	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00

1) SUBTOTALS This Period This Page (optional)	5500.00
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 57 OF 57
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

Outstanding Balance Beginning This Period 5000.00	Transaction ID : SD10.9852	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

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

Outstanding Balance Beginning This Period 14787.66	Transaction ID : SD10.9863	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 14787.66

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Vias Car Rental of PR		Nature of Debt (Purpose): Campaign vehicles rental.
Mailing Address Isla Verde		
City Carolina	State PR	Zip Code 00979

Outstanding Balance Beginning This Period 1803.00	Transaction ID : SD10.7201	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1803.00

1) SUBTOTALS This Period This Page (optional)	21590.66
2) TOTALS This Period (last page this line number only)	145701.30
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) ▶	145701.30