

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

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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))....	11500.00	773133.36
(b) Total Contribution Refunds (from Line 20(d))	0.00	3671.45
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	11500.00	769461.91
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	11578.45	747489.83
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	11578.45	747489.83
8. Cash on Hand at Close of Reporting Period (from Line 27).....	529.23	
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).....	88351.34	

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 07 / 01 / 2015 To: M M / D D / Y Y Y Y 09 / 30 / 2015

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).....	1000.00	510028.83
(ii) Unitemized.....	0.00	258604.53
(iii) TOTAL of contributions from individuals ▶	1000.00	768633.36
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	4500.00
(d) The Candidate.....	10500.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	11500.00	773133.36
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	2356.13
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	11500.00	775489.49

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	11578.45	747489.83
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	3671.45
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	3671.45
21. OTHER DISBURSEMENTS	0.00	7521.53
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	11578.45	758682.81

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	607.68
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	11500.00
25. SUBTOTAL (add Line 23 and Line 24).....	12107.68
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	11578.45
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	529.23

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

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

FOR LINE NUMBER: PAGE 5 OF 21
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial)
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
3000.00

Date of Receipt
08 / 14 / 2015

Transaction ID : SA11Al.11273

Amount of Each Receipt this Period
1000.00

Debt retirement

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

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

1000.00

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 21
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

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

Mailing Address Cond. Mansiones Garden Hills

City State Zip Code
Guaynabo PR 00966

FEC ID number of contributing federal political committee. **C** H2PR00065

Name of Employer Occupation
Self-Employed Attorney at Law

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
20788.26

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 17 / 2015

Transaction ID : SA11D.11274

Amount of Each Receipt this Period
10500.00

Debt retirement

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

10500.00

10500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 21			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Banco Popular de Puerto Rico			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015		
Mailing Address P.O. Box 362708			Amount of Each Disbursement this Period 15.00		
City San Juan	State PR	Zip Code 00936-2708	Transaction ID : SB17.11256		
Purpose of Disbursement Bank fees		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Banco Popular de Puerto Rico			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015		
Mailing Address P.O. Box 362708			Amount of Each Disbursement this Period 10.00		
City San Juan	State PR	Zip Code 00936-2708	Transaction ID : SB17.11257		
Purpose of Disbursement Bank fees		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Banco Popular de Puerto Rico			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015		
Mailing Address P.O. Box 362708			Amount of Each Disbursement this Period 1.05		
City San Juan	State PR	Zip Code 00936-2708	Transaction ID : SB17.11258		
Purpose of Disbursement Bank fee (state sales tax)		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	26.05
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 8 OF 21			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Banco Popular de Puerto Rico			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015
Mailing Address P.O. Box 362708			Amount of Each Disbursement this Period 0.10 Transaction ID : SB17.11259
City San Juan	State PR	Zip Code 00936-2708	
Purpose of Disbursement Bank fee (municipal sales tax)		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Banco Popular de Puerto Rico			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2015
Mailing Address P.O. Box 362708			Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.11260
City San Juan	State PR	Zip Code 00936-2708	
Purpose of Disbursement Bank fee		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. Banco Popular de Puerto Rico			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address P.O. Box 362708			Amount of Each Disbursement this Period 10.00 Transaction ID : SB17.11261
City San Juan	State PR	Zip Code 00936-2708	
Purpose of Disbursement Bank fee		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	25.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 21
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 1.05 Transaction ID : SB17.11262
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Bank fee (state sales tax)	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 0.10 Transaction ID : SB17.11263
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Bank fee (municipal sales tax)	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.11264
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Bank fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	16.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 21			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

Full Name (Last, First, Middle Initial) A. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 10.00 Transaction ID : SB17.11265
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Bank fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 1.05 Transaction ID : SB17.11266
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Bank fee (state sales tax)	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Banco Popular de Puerto Rico		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address P.O. Box 362708		Amount of Each Disbursement this Period 0.10 Transaction ID : SB17.11267
City San Juan	State PR	
Zip Code 00936-2708	Purpose of Disbursement Bank fee (municipal sales tax)	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	11.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 21			
	<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. Karenin Biaggi Velazquez			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2015	
Mailing Address Tintillo Gardens 6 St. M-21			Amount of Each Disbursement this Period 750.00	
City Guaynabo	State PR	Zip Code 00966	Transaction ID : SB17.11269	
Purpose of Disbursement Payment for research services		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) B. Sami Abu Osba/Shell Abuosba			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015	
Mailing Address Urb. San Agustin 1426 Luisa Capetilo St.			Amount of Each Disbursement this Period 750.00	
City San Juan	State PR	Zip Code 00921	Transaction ID : SB17.11270	
Purpose of Disbursement Payment of gasoline expenses		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. Vias Car Rental of P.R.			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2015	
Mailing Address Urb. Costa de Oro C-2 Marginal St.			Amount of Each Disbursement this Period 10000.00	
City Dorado	State PR	Zip Code 00646-2055	Transaction ID : SB17.11268	
Purpose of Disbursement Payment of car rental service		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).....	11500.00
TOTAL This Period (last page this line number only).....	11578.45

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

NAME OF COMMITTEE (In Full)

COX ALOMAR 2012 INC

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

Outstanding Balance Beginning This Period 100.01	Transaction ID : SD9.4979	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 100.01

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State Zip Code		

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State Zip Code		

Outstanding Balance Beginning This Period	Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment 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 13 OF 21
	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 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 750.00	Outstanding Balance at Close of This Period 750.00

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

C. 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 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 18000.00

1) SUBTOTALS This Period This Page (optional)	23750.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

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

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

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

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

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

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

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

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

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

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

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

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

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

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

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

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

Outstanding Balance Beginning This Period 2160.00	Transaction ID : SD10.7217	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2160.00

1) SUBTOTALS This Period This Page (optional)	6480.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

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):

Public Relations Expenses-Advertising

Mailing Address Centro Intl de Mercadeo Torre 1
Suite 406

City State Zip Code
Guaynabo PR 00968

Outstanding Balance Beginning This Period

7328.00

Transaction ID : SD10.10936

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7328.00

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

Claro PRT

Nature of Debt (Purpose):

Administrative expenses-Telephone services for campaign staff

Mailing Address PO Box 70366

City State Zip Code
San Juan PR 00936-8366

Outstanding Balance Beginning This Period

432.94

Transaction ID : SD10.7208

Amount Incurred This Period

-432.94

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.00

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

-100.01

Transaction ID : SD10.4256

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

-100.01

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

7227.99

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

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

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

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

Form/Schedule: SD10

Transaction ID : SD10.4256

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

Form/Schedule:

Transaction ID:

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

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Partido Popular Democratico Inc.	Nature of Debt (Purpose): Office Rent
Mailing Address 403 Constitucion Ave.	
City State Zip Code San Juan PR 00906	

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

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

Outstanding Balance Beginning This Period 4550.00	Transaction ID : SD10.9849	
Amount Incurred This Period -950.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3600.00

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

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

1) SUBTOTALS This Period This Page (optional)	12550.00
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): Field Operations Vehicle Rental
Mailing Address Valles Verde II Ap-1 Rio Maravilla Street		
City Bayamon	State PR	Zip Code 00961

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

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

Outstanding Balance Beginning This Period 1970.00	Transaction ID : SD10.9851	
Amount Incurred This Period 0.00	Payment This Period 750.00	Outstanding Balance at Close of This Period 1220.00

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

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

1) SUBTOTALS This Period This Page (optional)	▶	11940.00
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 20 OF 21
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
COX ALOMAR 2012 INC

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

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

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

Outstanding Balance Beginning This Period 10787.66	Transaction ID : SD10.9863	
Amount Incurred This Period 0.00	Payment This Period 10000.00	Outstanding Balance at Close of This Period 787.66

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

Outstanding Balance Beginning This Period 21862.79	Transaction ID : SD10.10934	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 21862.79

1) SUBTOTALS This Period This Page (optional)	22650.35
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
Vias Car Rental of PR

Mailing Address Isla Verde

City State Zip Code
 Carolina PR 00979

Nature of Debt (Purpose):
 Campaign vehicles rental.

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

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)	1803.00
2) TOTALS This Period (last page this line number only)	88351.34
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) ▶	88351.34