

**RAFAEL COX ALOMAR**  
Candidate for Puerto Rico's Resident Commissioner

*November 6, 2011*

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

RE: Cox Alomar 2012 Statement of Candidacy

To whom it may concern,

Please find enclosed the Federal Election Commission's Form 2, "Statement of Candidacy," for Rafael Cox Alomar of Puerto Rico.

If there is any further information the campaign can provide for the processing of this form, please contact me at the information below. Thank you in advance for your assistance.

Best,



**Nick Doctor**  
E: [nicholas.doctor@gmail.com](mailto:nicholas.doctor@gmail.com)  
C: (918) 633-5303

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**FEC FORM 2**  
**STATEMENT OF CANDIDACY**

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1. (a) Name of Candidate (in full) <b>Rafael Cox Alomar</b>			2. Candidate's FEC Identification Number <b>n/a</b>		
(b) Address (number and street) <b>Cond Mans Garden Hills</b>			<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code <b>Guaynabo, P.R. 00966</b>			3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation <b>Popular Democratic</b>	5. Office Sought <b>Resident Commissioner</b>	6. State & District of Candidate <b>Puerto Rico</b>			

**DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE**

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 election(s).  
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) <b>Cox Alomar 2012</b>	
(b) Address (number and street) <b>PO Box 362166</b>	
(c) City, State, and ZIP Code <b>San Juan, P.R. 00936</b>	

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES**

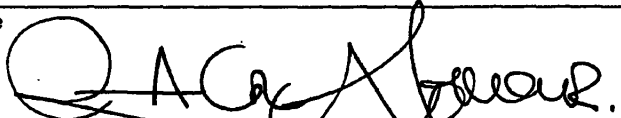
(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) <b>n/a</b>	
(b) Address (number and street)	
(c) City, State, and ZIP Code	

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


Signature of Candidate 	Date <b>11/5/2011</b>
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
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Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed Ex</i> Shipping Date <i>11/6/11</i>	
Next Business Day Delivery <input checked="" type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	<i>11/8/11</i> DATE PREPARED