07/28/2011 07:48

Image# 11932087789

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Cruise Lines International Association 2111 Wilson Boulevard 8th Floor ADDRESS (number and street) Check if different than previously Arlington ٧A 22201 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00432393 Χ REPORT OR (N) (A) TYPE OF REPORT (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year Х (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 0 1 0 1 2011 06 3 0 2011 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. J. Michael Crye Type or Print Name of Treasurer Electronically Filed by J. Michael Crye 07 28 2011 Signature of Treasurer Date 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 **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS Page 2

Write or Type Committee Name Cruise Lines International Association

FEC Form 3X (Rev. 02/2003)

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2011		9093.09
	(b) Cash on Hand at Begining of Reporting Period	9093.09	
	(c) Total Receipts (from Line 19)	69959.00	69959.00
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	79052.09	79052.09
7 .	Total Disbursements (from Line 31)	15500.00	15500.00
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	63552.09	63552.09
	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

Cruise Lines International Association

Report Covering the Period:

м м О 1

From:

D D D

2 0 1 1

To:

м м 0 6 ^D 3 0

Y Y Y Y 2 2 0 1 1

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	61365.00	61365.00
	(ii) Unitemized	8594.00	8594.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	69959.00	69959.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	69959.00	69959.00
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
4. 5.	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
Ο.	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
3.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	69959.00	69959.00
Э.	Total Federal Receipts (subtract Line 18(c) from Line 19)	69959.00	69959.00

FE6AN026

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)	of Dispuisements	Page 4
II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00	0.00
. Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committeesand Other Political Committees	15500.00	15500.00
. Independent Expenditure (use Schedule E)	0.00	0.00
. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
. Loan Repayments Made	0.00	0.00
. Loans Made	0.00	0.00
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 28(a), (b), and (c))	0.00	0.00
Other Disbursements	0.00	0.00
Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	15500.00	15500.00
 Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) 		
from Line 31)	15500.00	15500.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Total Contributions (other than loans) from Line 11(d), page 3)	69959.00	69959.00
	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	69959.00	69959.00
	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Cruise Lines International Association		on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Hector Alcalde Mailing Address 2111 Wilson Blvd Suite 850 City Manchester FEC ID number of contributing federal political committee. Name of Employer Information Requested Receipt For: Primary General Other (specify)	State Zip Code MA 01944 C Occupation Information Requested Aggregate Year-to-Date 1000.00	Date of Receipt M M / D D / Y Y Y Y Y O 6 28 2011 Transaction ID: A39757755F2BA45D3AA Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Christopeher Allen Mailing Address 540 Brickell Key drive #1028 City Miami FEC ID number of contributing federal political committee. Name of Employer Royal Caribbean Cruises Receipt For: Primary General	State Zip Code FL 33131-2641 C Occupation Director Deployment Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: A2513E3AABA464742A4 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Richard D. Ames Mailing Address 1082 Deerwood Ln City Weston FEC ID number of contributing federal political committee.	State Zip Code FL 33326-2848	Date of Receipt M M O 4 O 5 O 5 O 2 O 1 1 Transaction ID: A49DA51314D5B483399 Amount of Each Receipt this Period 1000.00
Name of Employer Carnival Corporation Receipt For: Primary General Other (specify) ▼	Occupation Senior Vice President Aggregate Year-to-Date 1000.00	
SUBTOTAL of Receipts This Page (optional)		2500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Cruise Lines International Association	tatements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Micky Arison Mailing Address 9999 Collins Ave City Miami FEC ID number of contributing federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	State Zip Code FL 33134 C Occupation Chairman & CEO Aggregate Year-to-Date 5000.00	Date of Receipt M M M D D D 2 2 1 1 Transaction ID: AD209B12CE2AA48FD9 Amount of Each Receipt this Period 5000.00
Full Name (Last, First, Middle Initial) Louis Bafalis Mailing Address 11215 Devereux Mano City Fairfax Station FEC ID number of contributing federal political committee. Name of Employer Information Requested Receipt For: Primary General Other (specify)	r Lane State Zip Code VA 22039-2047 C Occupation Information Requested Aggregate Year-to-Date ▼	Date of Receipt M M M C D D C Y Y Y Y Y Y O 6 28 2011 Transaction ID: AE19BCB8FDA53453F8B Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) David Bernstein Mailing Address 12000 S. w 90th Ave City Miami FEC ID number of contributing federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	State Zip Code FL 33176-5105 C Occupation Sr. Vice President & CFO Aggregate Year-to-Date ▼ 5000.00	Date of Receipt M M M / D D / 2 0 1 1 Transaction ID: A1A73024B62D14855B9 Amount of Each Receipt this Period 5000.00
SUBTOTAL of Receipts This Page (optional)		11000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 44 (check only one) X 11a
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) Cruise Lines International Association	and Statements may not be sold or used by any pers ng the name and address of any political committee to ation	
Full Name (Last, First, Middle Initial) James R. Border Mailing Address 17828 N. w 15th S City Pembroke Pines FEC ID number of contributing federal political committee. Name of Employer Carnival Cruise Lines Receipt For: Primary General Other (specify)		Date of Receipt M M M D D D Z D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Brian Brennan Mailing Address 1600 Victoria Poin City Weston FEC ID number of contributing federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	State Zip Code FL 33327-1301 C Occupation Director Aggregate Year-to-Date 250.00	Date of Receipt M M M D D D Z 2 0 1 1 Transaction ID: AED54369D96F747E99F Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Gerry Cahill Mailing Address 14641 Mustang T City Southwest Ranches FEC ID number of contributing federal political committee. Name of Employer Carnival Cruise Lines Receipt For: Primary General Other (specify)	State Zip Code FL 33330-3528 C Occupation President & CEO Aggregate Year-to-Date 5000.00	Date of Receipt M M M O B O B 2 0 1 1 Transaction ID: A54E70B5FB2C54D36A9 Amount of Each Receipt this Period 5000.00
SUBTOTAL of Receipts This Page (option	nal)	6250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Cruise Lines International Association	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Stefan Christoffersson Mailing Address 729 Crystal Ct City Weston FEC ID number of contributing federal political committee. Name of Employer Carnival Cruise Lines Receipt For: Primary General Other (specify)	State Zip Code FL 33326-2914 C Occupation Dir Hotel Services Aggregate Year-to-Date 350.00	Date of Receipt M M M D D D D D D D D D D D D D D D D
Full Name (Last, First, Middle Initial) Michael Crye Mailing Address 2909 Woodstock City Silver Spring FEC ID number of contributing federal political committee. Name of Employer Cruise Lines Infernational Ass Receipt For: Primary General Other (specify)	State Zip Code MD 20910-1249 C Occupation EUP Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: AB07130929DB54F3D99 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Julie C. Dofort Mailing Address 3115 Maple Ln City Davie FEC ID number of contributing federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	State Zip Code FL 33328-6715 C Occupation Senior Vice President Aggregate Year-to-Date 500.00	Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: A6925399CCE964594BE Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1850.00

	JLE A (FEC Form 3X) ED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17
NAME O	tion copied from such Reports and sercial purposes, other than using the F COMMITTEE (In Full) Lines International Association	Statements may not be sold or used by any perse name and address of any political committee to	
Full Name of Carnival Print	e (Last, First, Middle Initial) A. Dow ddress 1750 P Street NW gton number of contributing olitical committee. Employer Corporation	State Zip Code DC 20036-1340 C Occupation Vice President Public Affairs Aggregate Year-to-Date 5000.00	Date of Receipt M M M / D D / Y Y Y Y Y O 2 0 1 1 Transaction ID: A2BD84292D7BC43C2AI Amount of Each Receipt this Period 5000.00
Mailing A City Mirama FEC ID n federal po	r number of contributing olitical committee. Employer Corporation	State Zip Code FL 33029-2531 C Occupation General Counsel Aggregate Year-to-Date	Date of Receipt M M M O D O D O D O D O D O D O D O D O
Full Name Douglas For Mailing A City Hollywo	e (Last, First, Middle Initial) E. Eney ddress 317 Palm St	300.00 300.00 State Zip Code FL 33019-4505 C	Date of Receipt M M M D D D Y Y Y Y Y O 4 0 5 2 0 1 1 Transaction ID: A0B72B8573FC74AD68A Amount of Each Receipt this Period 500.00
Name of Carnival Receipt F	Employer Cruise Lines	Occupation VP, Systems & Tech. Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL	of Receipts This Page (optional) .		5800.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) Cruise Lines International Association	d Statements may not be sold or used by any personant he name and address of any political committee to on	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Kevin Fay Mailing Address 1101 Ingleside Aven City Mc Lean FEC ID number of contributing federal political committee. Name of Employer Information Requested Receipt For: Primary Other (specify)	State Zip Code VA 22101-2131 C Occupation Information Requested Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Peter Fetten Mailing Address 12150 NW 4th Stree City Plantation FEC ID number of contributing federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	State Zip Code FL 33325-2422 C Occupation SUP-Ship Refit Aggregate Year-to-Date 800.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: AFEE6DE62AC3C4ED7AC Amount of Each Receipt this Period 800.00
Full Name (Last, First, Middle Initial) Howard Frank Mailing Address 445 Grand Bay Dr City Key Biscayne FEC ID number of contributing federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	State Zip Code FL 33149-1905 C Occupation Vice Chairman & Coo Aggregate Year-to-Date 5000.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: A47D0881EAF824864942 Amount of Each Receipt this Period 5000.00
SUBTOTAL of Receipts This Page (optional)	· 	6800.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Cruise Lines International Association	Statements may not be sold or used by any persole name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Victoria L. Freed Mailing Address 2677 Riviera Ct City Weston FEC ID number of contributing federal political committee. Name of Employer Royal Caribbean Cruises Receipt For: Primary General Other (specify)	State Zip Code FL 33332-3420 C Occupation Sr. Vice President Aggregate Year-to-Date 500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Transaction ID: AA14A5544D42B4817BC Amount of Each Receipt this Period 500.00 Political Contribution
Full Name (Last, First, Middle Initial) Charles Fuchs Mailing Address 19254 S. Gardenia A City Weston FEC ID number of contributing federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	State Zip Code FL 33332-4404 C Occupation Manager, Tech. Audit Services Aggregate Year-to-Date 250.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Timothy Gallagher Mailing Address 1429 Urbino Ave City Miami FEC ID number of contributing federal political committee. Name of Employer Carnival Cruise Lines Receipt For: Primary General Other (specify)	State Zip Code FL 33146-1927 C Occupation VP Public Relations Aggregate Year-to-Date 300.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: AD9D837DD0E5D4FF9B Amount of Each Receipt this Period 300.00
SUBTOTAL of Receipts This Page (optional)		1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 44 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Cruise Lines International Association	Statements may not be sold or used by any pers he name and address of any political committee to on	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Antje Gibson Mailing Address 12281 SW 121st Ter City Miami FEC ID number of contributing federal political committee. Name of Employer Royal Caribbean Cruises Receipt For: Primary General Other (specify)	State Zip Code FL 33186-5415 C Occupation Vice President Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y O 5 1 7 2 0 1 1 Transaction ID: AF0391EF318E4497AAF4 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Adam Goldstein Mailing Address 4321 Santa Maria St City Miami FEC ID number of contributing federal political committee. Name of Employer Royal Caribbean Cruises Receipt For: Primary General Other (specify)	State Zip Code FL 33146-1126 C Occupation President & CEO Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y O 5 0 9 2 0 1 1 Transaction ID: A5139E9E2C3E84C26868 Amount of Each Receipt this Period 1000.00 Political Contribution
Full Name (Last, First, Middle Initial) John Haeflinger Mailing Address 3353 W. Stonebrook City Davie FEC ID number of contributing federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	State Zip Code FL 33330-1274 C Occupation Vice President Aggregate Year-to-Date 1500.00	Date of Receipt M M M O D D C 2 0 1 1 Transaction ID: AFC07CBC31AA0497D93 Amount of Each Receipt this Period 1500.00
SUBTOTAL of Receipts This Page (optional)		2750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 44 (check only one) X 11a
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Cruise Lines International Association	e name and add	r not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) John Harshaw Mailing Address 10623 SW 26 Ct City Davie FEC ID number of contributing federal political committee. Name of Employer Carnival Cruise Lines Receipt For: Primary General Other (specify)	State FL C Occupation Director I Aggregate		Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: A8D1AF778229A4564B5D Amount of Each Receipt this Period 300.00
- В.	Full Name (Last, First, Middle Initial) Stephen Hodes Mailing Address 3530 Magellon Circle Unit 615 City Miami FEC ID number of contributing federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	State FL C Occupation Director Aggregate	Zip Code 33180-3751 Year-to-Date ▼ 270.00	Date of Receipt M M M / D D / Y Y Y Y Y O 4 0 5 2 0 1 1 Transaction ID: A6A1EA93B08B24CC297 Amount of Each Receipt this Period 270.00
- C.	Full Name (Last, First, Middle Initial) Vicki Iseman Mailing Address 328 Cameron Station City Alexandria FEC ID number of contributing federal political committee. Name of Employer Information Requested Receipt For: Primary General Other (specify)	State VA C Occupation Information	Zip Code 22304-8623 non Requested Year-to-Date ▼ 250.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	SUBTOTAL of Receipts This Page (optional) .			820.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	Check only one
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Cruise Lines International Associatio	ne name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Giora Israel Mailing Address 11305 SW 72nd Ct City Miami FEC ID number of contributing federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)		Zip Code 33156-4618 on egic Planning e Year-to-Date ▼ 500.00	Date of Receipt M M M / D D / Y Y Y Y Y O 4 O 5 / 2 0 1 1 Transaction ID: AAF9EFF3E374B44DBAB5 Amount of Each Receipt this Period 500.00
В.	Full Name (Last, First, Middle Initial) Roberta Jacoby Mailing Address 4958 SW 88th St City Coral Gables FEC ID number of contributing federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	- - 	Zip Code 33156-2232 In ice President e Year-to-Date ▼ 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: A7F5CB810001C4BD5ADC Amount of Each Receipt this Period
- C.	Full Name (Last, First, Middle Initial) Paul S. Jarvis Mailing Address 4355 Dogwood Circle City Weston FEC ID number of contributing federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	State FL C Occupation Vice Pre	Zip Code 33331-5004 on sident of Casino Operations e Year-to-Date ▼ 500.00	Date of Receipt M M J D D D J 2 0 1 1 Transaction ID: A21FB754579284609AE9 Amount of Each Receipt this Period 500.00 Political Contribution
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		<u>. </u>	2000.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 44 (check only one) X
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Cruise Lines International Association	e name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Michael Jones Mailing Address 90 Edgewater Drive City Coral Gables FEC ID number of contributing federal political committee.	State FL	Zip Code 33133-6942	Date of Receipt M M
	Name of Employer Royal Caribbean Cruises Receipt For: Primary Other (specify) ▼	Occupation VP Supp Aggregate		
В.	Full Name (Last, First, Middle Initial) Michael Kaczmarek Mailing Address 1410 Lacosta Dr City	Date of Receipt 0 4 0 5 Transaction ID: A9F3770CD90BD45978		
	Pembroke Pines FEC ID number of contributing federal political committee.	C	33027	Amount of Each Receipt this Period 750.00
	Name of Employer Carnival Corporation Receipt For: Primary General Other (specify) ▼	, '	Shipbuilding Year-to-Date ▼ 750.00	
с. С.	Full Name (Last, First, Middle Initial) Eleni Kalisch Mailing Address 6468 Manhasset Lane	Date of Receipt		
	City	0 5 1 7 2 0 1 1 Transaction ID: AC7C8DA2C3A5942B0AC		
	Alexandria	State VA	Zip Code 22312-2339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Royal Caribbean Cruises VP - Con		n gressional Affairs	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) .			1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 44 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) Cruise Lines International Association	d Statements may not be sold or used by any persible name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Karen Kirk Mailing Address 117 Santander Ave City Coral Gables FEC ID number of contributing federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	State Zip Code FL 33134-6822 C Occupation Dir. Of Special Projects Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M D D Z D Z D D
Full Name (Last, First, Middle Initial) Joseph Robert Kirk Mailing Address 117 Santander Aven City Coral Gables FEC ID number of contributing federal political committee. Name of Employer Carnival Cruise Lines Receipt For: Primary General Other (specify)	State Zip Code FL 33134-6822 C Occupation VP - Claims Aggregate Year-to-Date ▼ 350.00	Date of Receipt M M M O B O B O B O C O D O C O C O C O C O C O C O C O C
Full Name (Last, First, Middle Initial) Edie Kongsberg-Bornstein Mailing Address 1764 Victoria Pointe City Weston FEC ID number of contributing federal political committee. Name of Employer Carnival Cruise Lines Receipt For: Primary General Other (specify)	Circle State Zip Code FL 33327-1306 C Occupation Vice President Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M M O B O B O B O D O D O D O D O D O D O D
SUBTOTAL of Receipts This Page (optional)		1100.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Cruise Lines International Association	tatements may not be sold or used by any personame and address of any political committee to	
Full Name (Last, First, Middle Initial) Zlatko Kosovic Mailing Address 701 Brickell Key Blvd. City Miami FEC ID number of contributing federal political committee. Name of Employer Royal Caribbean Cruises Receipt For: Primary General	State Zip Code FL 33131-2674 C Occupation Director Marine Operations Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y O 6 3 0 2 0 1 1 Transaction ID: A1C309A23D0794EA7 Amount of Each Receipt this Period 500.00
Other (specify) Full Name (Last, First, Middle Initial) Cyrus Marfatia Mailing Address 17471 S. w 33rd St City Miramar FEC ID number of contributing federal political committee.	State Zip Code FL 33029-1695 C	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Carnival Cruise Lines Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) William Martin Mailing Address 1251 Quail Ave	VP Food & Beverage Aggregate Year-to-Date 250.00	Date of Receipt
City Miami Springs FEC ID number of contributing federal political committee.	State Zip Code FL 33166-3137 C	Transaction ID: AD36F3180D6464ECC Amount of Each Receipt this Period 500.00
Name of Employer Royal Caribbean Cruises Receipt For: Primary General Other (specify) ▼	Occupation VP Trade Support & Srvc Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1250.00

	HEDULE A (FEC Form 3X EMIZED RECEIPTS	(3)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19/44 (check only one) X 11a
or fo	rinformation copied from such Reports and or commercial purposes, other than using NAME OF COMMITTEE (In Full) Cruise Lines International Association	the name and ad	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
A. !!	Full Name (Last, First, Middle Initial) Michael McNamara Mailing Address 20001 NE 23 Ave City Miami FEC ID number of contributing dederal political committee. Name of Employer Royal Caribbean Cruises Receipt For: Primary General Other (specify)		Zip Code 33180-1808 on ergy Management e Year-to-Date ▼ 1000.00	Date of Receipt M M M / D D N / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
B	Full Name (Last, First, Middle Initial) John Meszaros Mailing Address 2301 Collins Avenue City Miami FEC ID number of contributing rederal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	State FL C Occupatio VP, Supp	Zip Code 33139-1630 In oly Chain Management e Year-to-Date 1000.00	Date of Receipt M M M O D D O D O D O D O D O D O D O D
C. !	Full Name (Last, First, Middle Initial) Mark L Novell Mailing Address 6410 NW 106 Terra City Parkland FEC ID number of contributing rederal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	State FL C Occupation Vice Pres	Zip Code 33076-3767 In sident Asst. Controller e Year-to-Date ▼ 500.00	Date of Receipt M M M D D D D D D D D D D D D D D D D
SU	BTOTAL of Receipts This Page (optional)		2500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the report of the NAME OF COMMITTEE (In Full) Cruise Lines International Association	atements may not be sold or used by any personame and address of any political committee to	
Full Name (Last, First, Middle Initial) Mark O'Brien Mailing Address 7261 S. w 117th Terrac City Miami FEC ID number of contributing federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	State Zip Code FL 33156-4665 C Occupation Director, Corporate Tax Aggregate Year-to-Date 300.00	Date of Receipt M M / D D / Y Y Y Y Y O 4 2 0 1 1 Transaction ID: A47C95D19B17F4381B2 Amount of Each Receipt this Period 300.00
Full Name (Last, First, Middle Initial) James Oshaughnessy Mailing Address 701 Brickell Key Blvd. Apt. 301 City Miami FEC ID number of contributing federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	State Zip Code FL 33131-2675 C Occupation Director Aggregate Year-to-Date 300.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: A8267BB5C6B6A475EB9 Amount of Each Receipt this Period 300.00 Political Contribution
Full Name (Last, First, Middle Initial) Lisa Perlo Mailing Address 921 Coco Plum Way City Plantation FEC ID number of contributing federal political committee. Name of Employer Celebrity Cruises Receipt For: Primary General Other (specify) Other (specify)	State Zip Code FL 33324-3705 C Occupation VP Revenue Management Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	•	1100.00

	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 44 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) Cruise Lines International Association	he name and ad	ly not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u>∠</u> A .	Full Name (Last, First, Middle Initial) Nancy G Prowitt Mailing Address 3749 N Tazewell Str			Date of Receipt 0 6 2 8 2 0 1 1
	City Arlington FEC ID number of contributing	State VA	Zip Code 22207-4572	Transaction ID: ABD36FBFA07534EDA80 Amount of Each Receipt this Period
	federal political committee. Name of Employer Information Requested	Occupation		1000.00
	Receipt For: Primary General Other (specify)		ion Requested e Year-to-Date ▼ 1000.00	
В.	Full Name (Last, First, Middle Initial) Veda Rampat Mailing Address 15007 SW 38th Stree	Date of Receipt 0 4 0 5 2 0 1 1		
	City Davie	State FL	Zip Code 33331-2750	Transaction ID: A9361ABDE622D4B8BBD Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		945.00
	Name of Employer Carnival Cruise Lines Receipt For: Primary General Other (specify)		on ion Requested e Year-to-Date ▼ 945.00	
_ C.	Full Name (Last, First, Middle Initial) Douglas R. Santoni	Date of Receipt		
	Mailing Address 4100 El Prado Blvd City	0 6 3 0 2 0 1 1 Transaction ID: AFDADA1F7765348028C		
	<u>Miami</u>	State FL	Zip Code 33133-6312	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			1500.00
	Name of Employer Royal Caribbean Cruises Receipt For:	- ' '	enue Management e Year-to-Date	
	Primary General Other (specify) ▼	, tiggi ogati	1500.00	
Γ		-		3445.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 44 (check only one) X
\ \ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Cruise Lines International Association	e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Paul Schlesinger Mailing Address 6061 Sugarstone Cou City Mc Lean	rt State VA	Zip Code	Date of Receipt M
	FEC ID number of contributing federal political committee.	C	22101-3247	Amount of Each Receipt this Period 250.00
	Name of Employer Information Requested Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		ion Requested e Year-to-Date ▼ 250.00]
В.	Full Name (Last, First, Middle Initial) Bob Sharak Mailing Address 12760 NW 65th Drive			Date of Receipt M
	City Parkland FEC ID number of contributing federal political committee.	State FL	Zip Code 33076-1943	Transaction ID: AE7603179C4C6491B9A5 Amount of Each Receipt this Period 500.00
	Name of Employer Cruise Lines International Ass Receipt For: ☐ Primary ☐ General Other (specify) ▼	, '	rketing and Distribution e Year-to-Date ▼ 500.00	
- С.	Full Name (Last, First, Middle Initial) Barbara Shrut Mailing Address 436 Bargello Ave			Date of Receipt 0 5 0 9 2 0 1 1
	City Coral Gables FEC ID number of contributing	State FL	Zip Code 33146-2802	Transaction ID: AD74090B2EEDF44D99C8 Amount of Each Receipt this Period 250.00
	federal political committee. Name of Employer Royal Caribbean Cruises	Occupation VP Finar	nnnnce + Admin	Political Contribution
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional) .			1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 44 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) Cruise Lines International Association	Statements may not be sold or used by any pers he name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mary C. Sloan Mailing Address 4172 Douglas Rd City Miami FEC ID number of contributing federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	State Zip Code FL 33133-6852 C Occupation VP, Risk Management Aggregate Year-to-Date ▼ 450.00	Date of Receipt M M D D 2 0 1 1
Full Name (Last, First, Middle Initial) Bradley Stein Mailing Address 7220 SW 108th Terr City Miami FEC ID number of contributing federal political committee. Name of Employer Royal Caribbean Cruises Receipt For: Primary General Other (specify)	State Zip Code FL 33156-3852 C Occupation VP General Counsel Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: A8FABEE2E5E9C4611A1: Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Eric Stewart Mailing Address 4162 SW 188th Ave City Miramar FEC ID number of contributing federal political committee. Name of Employer Royal Caribbean Cruises Receipt For: Primary General Other (specify)	State Zip Code FL 33029-2764 C Occupation Director Global Talent Aquisition Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: A693BC2FF147048D0ACS Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb		1700.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 44 (check only one) X 11a
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Cruise Lines International Associatio	ne name and add	r not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Gayle Stewwart-Loudis Mailing Address 7515 SW 28 Street City Davie FEC ID number of contributing federal political committee. Name of Employer Cruise Lines International Ass Receipt For: Primary General Other (specify)	State FL C Occupation Director Aggregate	Zip Code 33314-1004	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: A67DF0F77F96E4E60B7 Amount of Each Receipt this Period 300.00
_ В.	Full Name (Last, First, Middle Initial) Lourdes Suarez Mailing Address 2475 Brickell Avenue City Miami FEC ID number of contributing	State FL	Zip Code 33129-2483	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	1	n : Treasurer • Year-to-Date ▼	500.00
_ C.	Full Name (Last, First, Middle Initial) Thomas Thompson Mailing Address 9334 Brambly Ln City Alexandria FEC ID number of contributing	State VA	Zip Code 22309-3010	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	rederal political committee. Name of Employer Iccl Receipt For: Primary General Other (specify) ▼	Occupation Executive Aggregate		
Γ	SUBTOTAL of Receipts This Page (optional)			1600.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Cruise Lines International Association	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Terry L. Thornton Mailing Address 6901 SW 136th St City Miami FEC ID number of contributing federal political committee. Name of Employer Carnival Cruise Lines Receipt For: Primary General Other (specify)	State Zip Code FL 33156-6970 C Occupation Senior Vice President Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Lynn Torrent Mailing Address 2100 N. Ocean Blvd #1102 City Fort Lauderdale FEC ID number of contributing federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	State Zip Code FL 33305-1942 C Occupation Vice President, Marketing Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: AB96B2891AF344DFEBF Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) James Van Langen Mailing Address 4738 NW 97th Ct City Doral FEC ID number of contributing federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General Other (specify)	State Zip Code FL 33178-1977 C Occupation Vice President Aggregate Year-to-Date 250.00	Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: AE53F76A0E027496EBB Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)	>	1250.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 44 (check only one) X 11a 11b 11c 12 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) Cruise Lines International Association	d Statements may not be sold or used by any personant he name and address of any political committee to on	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Bert Van Middendorp Mailing Address 2925 Catalina Street City Miami FEC ID number of contributing federal political committee. Name of Employer Azamara Club Cruises Receipt For: Primary General Other (specify)	State Zip Code FL 33133-3718 C Occupation AVP Hotel Operations Aggregate Year-to-Date 1000.00	Date of Receipt M M O B O B O C O D O C O C O C O C O C O C O C O C
Full Name (Last, First, Middle Initial) Guillermo Villa Mailing Address 5774 SW 131 Terrace City Pinecrest FEC ID number of contributing federal political committee. Name of Employer Royal Caribbean Cruises Receipt For: Primary General Other (specify)	State Zip Code FL 33156-7260 C Occupation VP - Total Rewards Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: AE93C92E40D6D40D7B50 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Dwayne Warner Mailing Address 3906 SW 190 Ave City Miramar FEC ID number of contributing federal political committee. Name of Employer Carnival Cruise Lines Receipt For: Primary General Other (specify)	State Zip Code FL 33029-2726 C Occupation Staff VP Strategic Automation Aggregate Year-to-Date 400.00	Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: A7BFDB42F586F4B429C6 Amount of Each Receipt this Period 400.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb		1900.00

SCHEDULE A (FEC FO	for each of	arate schedule(s)	COR LINE NUMBER: PAGE 27 / 44 check only one) X
Any information copied from such F or for commercial purposes, other the NAME OF COMMITTEE (In Full Cruise Lines International A	an using the name and address of any p	or used by any person for political committee to soli	or the purpose of soliciting contributions
Full Name (Last, First, Middle In Paul T. Weber Mailing Address 3633 Heron City Weston FEC ID number of contributing federal political committee. Name of Employer Carnival Corporation Receipt For: Primary General	,	3708 h Ops	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼ Full Name (Last, First, Middle In Brenda Yester Mailing Address 14390 Stirli	ng Rd	700.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Southwest Ranches FEC ID number of contributing federal political committee. Name of Employer Carnival Cruise Lines Receipt For: Primary General Other (specify)	State Zip Coc FL 33330- C Occupation VP Revenue Manag Aggregate Year-to-Date	2904 Jement	Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle In Giovanni Zanotti Mailing Address 3655 NW 8 City	7th Avenue State Zip Coo		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Doral FEC ID number of contributing federal political committee. Name of Employer	FL 33178-	2418	Amount of Each Receipt this Period 1000.00
Carnival Corporation Receipt For: Primary General Other (specify)	VP, Strategic Source Aggregate Year-to-Date	-	
SUBTOTAL of Receipts This Page	optional)		2200.00
	line number only)		61365.00

		3 (FEC Form	•	Use sepa	arate schedule(s)		FOR LINI							28 / 44		
ITE 	MIZED DIS	SBURSEMEN	ITS	for each Detailed	category of the Summary Page		21b 27	22 28		23 28b					26 30b	
		ed from such Reports poses, other than us														
1	NAME OF COMM	•														
	Full Name (Last, First, Middle Initial) Bill Nelson for U.S. Senate								te of D	isburs	ement		F55B2		I 3519	
ľ	Mailing Address 500 RED SAIL WAY								1 M		21	Y	ž 0 ť	1 Y		
	City SATELITE BEA	ACH		State FL	Zip Code 32937			An	nount c	f Each	n Disbu	ursem	ent this	Perio	od	
F	Purpose of Disbu						•						3000.0	0		
	Candidate Name Sen. Bill Nelso	n					ategory/ Type									
	Office Sought:	House X Senate President District:	Disburse	ement For: Primary Other (spe	2012 X General ecify) ▼											
F		First, Middle Initial)							insact te of D				E48C8	06B4	10DD	
1	Mailing Address PO Box 27								5 ^M	/ D	3 0 3 1	Y	ž 0 1	1 Y		
	City Hollidaysburg			State PA	Zip Code 16648			An	nount c	f Each	n Disbu	ursem	ent this	Perio	od .	
Ē	Purpose of Disbu	rsement					•	L	-				1000.0	0		
(Candidate Name Rep. Bill Franklin Shuster						ategory/ Type									
	Office Sought:	X House Senate President District: 09		ement For: Primary Other (spe	2012 General											
F		First, Middle Initial)							nsact te of D				725B7	'A84	B808	
1	Mailing Address	430 S CAPITO	L ST SE					0	5 ^M	/ D	1 2 /	Y	ž 0 1	1 Y		
	City WASHINGTON			State DC	Zip Code 20003			An	nount c	f Each	n Disbu	ursem	ent this	Perio	od	
Ē	Purpose of Disbu	rsement					* *	L				-	1000.0	0		
(Candidate Name			ategory/ Type												
(Office Sought:	House Senate President	X	ment For: Primary Other (spe	2010 General		- 7,6-2									
	State:	District:	Other20	010											_	
SU	BTOTAL of Disb	oursements This Pag	e (optional) .				>	Ļ		-		3	3000.0	0	\exists	
то	TAL This Period	(last page this line r	umber only)				•						3X) (R			

SCHEDIII E B (FEC Form 3Y)

Amount of Each Disbursement Mailing Address P.O. Box 5419 City Senate President Senate Persident State: NAM District: 08 Full Name (Last, First, Middle Initial) Castor for Congress Mailing Address P.O. Box 5419 City State Zip Code Senate President State: P.O. Box 5419 City State Zip Code Senate President State: P.O. Box 5419 City State Zip Code Senate President State: P.O. Box 5419 City State Zip Code Senate President State: P.O. Box 5419 City State Zip Code Senate President State: P.O. Box 5419 City State Zip Code Senate President State: P.O. Box 5419 City State Zip Code Senate President State: P.O. Box 5419 City State Zip Code Senate President State: P.O. Box 5419 City State Zip Code Senate President State: P.O. Box 5419 City State Zip Code Senate President State: P.O. Box 5419 City State Zip Code Senate President State: P.O. Box 5419 City State Zip Code Senate President State: P.O. Box 5419 City State Zip Code Senate President State: P.O. Box 5419 City State Zip Code Senate President State: P.O. Box 5419 City State Zip Code Senate President State: P.O. Box 5419 City State Zip Code Senate President State: P.O. Box 5419 City State Zip Code Senate President State: P.O. Box 5419 City State: P.O. B	TEMIZED DISPUBLICATION	Use separate schedule(s)	FOR LINE (check only	
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) Cruise Lines International Association Full Name (Last, First, Middle Initial) Capuano for Congress Mailing Address P.O. Box 440305 City State Zip Code MA 02144 Purpose of Disbursement Ma US House Original Principle Senate President State: MA District: 08 Full Name (Last, First, Middle Initial) Castor for Congress Mailing Address P.O. Box 5419 City State Zip Code FL 33675 Full Name (Last, First, Middle Initial) City State Zip Code FL 33675 City State Senate President State: FL District: 11 Full Name (Last, First, Middle Initial) City State Zip Code FL 33675 City State Senate Candidate Name Rep. Kathy Castor Office Sought: Yeinary General Coffice Sought: Yeinary General City State Senate Senat		Detailed Summary Page	27	28a 28b 28c 29 30b
NAME OF COMMITTEE (in Full) Cruise Lines International Association Full Name (Last, First, Middle Initial) Capuano for Congress Mailing Address P.O. Box 440305 City Somerville MA 02144 Purpose of Disbursement MA US House Candidate Name Rep. Michael E. Capuano Office Sought: X House City Tampa City State: MA District: 08 Full Name (Last, First, Middle Initial) Castor for Congress Mailing Address P.O. Box 5419 City Tampa Gity Transaction ID: B2C7FE463490846 Date of Disbursement III				
Full Name (Last, First, Middle Initial) Capuano for Congress Mailing Address P.O. Box 440305 City Somerville State Zip Code MA 02144 Purpose of Disbursement MA US House Candidate Name Rep. Michael E. Capuano Office Sought: X House Senate President State: MA District: 08 Full Name (Last, First, Middle Initial) Castor for Congress Mailing Address P.O. Box 5419 Transaction ID: B2C7FE463490846 Date of Disbursement Initial District: 08 Full Name (Last, First, Middle Initial) Castor for Congress Mailing Address P.O. Box 5419 Transaction ID: B0D3ED910064C4, Date of Disbursement this Period Tampa FL 33675 Purpose of Disbursement FL US House Candidate Name Riep. Kathy Castor Office Sought: X House Senate President State: FL District: 11 Full Name (Last, First, Middle Initial) Citizens for Tom Petri Mailing Address PO Box 270 City State Zip Code WI 54936 Purpose of Disbursement Mailing Address PO Box 270 City State Zip Code WI 54936 Transaction ID: B0D3ED910064C4, Date of Disbursement this Period Transaction ID: B15I5IF2916CD4: Date of Disbursement Other (specify) ▼ Transaction ID: B15I5IF2916CD4: Date of Disbursement Transaction ID: B15I5IF2916CD4: Date of Disbursement Transaction ID: B15I5IF2916CD4: Date of Disbursement Other (specify) ▼ Transaction ID: B15I5IF2916CD4: Date of Disbursement Other (specify) ▼ Transaction ID: B15I5IF2916CD4: Date of Disbursement Other (specify) ▼ Transaction ID: B15I5IF2916CD4: Date of Disbursement Other (specify) ▼ Transaction ID: B15I5IF2916CD4: Date of Disbursement Other (specify) ▼ Transaction ID: B15I5IF2916CD4: Date of Disbursement Other (specify) ▼ Transaction ID: B15I5IF2916CD4: Date of Disbursement Other (specify) ▼ Transaction ID: B15I5IF2916CD4: Date of Disbursement Other (specify) ▼ Transaction ID: B15I5IF2916CD4: Date of Disbursement Other (specify) ▼ Transaction ID: B15I5IF2916CD4: Date of Disbursement Other (specify) ▼ Transaction ID: B15I5IF2916CD4: Date of Disbursement Other (specify) ▼ Transaction ID: B15IF2916CD4: Date of Disbur				
Capuano for Congress Mailing Address P.O. Box 440305 City Somerville State Zip Code Somerville MA 02144 Purpose of Disbursement MA US House Candidate Name Rep. Michael E. Capuano Office Sought: X House Senate President Safety Senate President Safety Category/ Type City State Zip Code Senate President State: MA District: 08 Full Name (Last, First, Middle Initial) Castor for Congress Mailing Address P.O. Box 5419 City State Zip Code Tampa FL 33675 Purpose of Disbursement FC: 2012 City State Zip Code Tampa FL 33675 Purpose of Disbursement FL US House Candidate Name Rep. Kathy Castor Office Sought: X House Senate President Senate President State: FL District: 11 Full Name (Last, First, Middle Initial) City State Zip Code Type Office Sought: X House Senate President Senate President State: FL District: 11 Full Name (Last, First, Middle Initial) City State Zip Code Wil 54936 Transaction ID: B015B1F2916CD4 Amount of Each Disbursement this Perior Type Office Sought: X House Senate Vill Shouse Category/ Type City State Zip Code Wil 54936 Transaction ID: BA15B1F2916CD4 Amount of Each Disbursement this Perior Office Sought: X Primary General Other (specify) ▼ Amount of Each Disbursement this Perior Senate Vill Shouse Candidate Name Rep. Tom E. Petri Office Sought: X Primary General Other (specify) ▼ Senate President Senate Pr	Cruise Lines International Association			
Mailing Address P.O. Box 440305 City Somerville MA 02144 Purpose of Disbursement MA US House Candidate Name Rep. Michael E. Capuano Office Sought:	,			Transaction ID: B2C7FE4634908460B8
City Somerville State Zip Code MA O2144 Disbursement this Period	Capuano for Congress			
Sciencyille MA 02144 Purpose of Disbursement Maling Address Candidate Name Rep. Michael E. Capuano Office Sought: X House Senate President State: MA District: 08 Full Name (Last, First, Middle Initial) Castor for Congress Mailing Address P.O. Box 5419 City Tampa FL 33675 Purpose of Disbursement FL US House Candidate Name Rep. Kathy Castor Office Sought: X House Candidate Name Rep. Kathy Castor Office Sought: X House Candidate Name President State: FL District: 11 Full Name (Last, First, Middle Initial) Citizens for Tom Petri Mailing Address PO Box 270 City Fond Du Lac Wi 54936 Purpose of Disbursement Wi US House Candidate Name Rep. Tom E. Petri Office Sought: X House Candidate Name Rep. Tom E. Petri Office Sought: X Primary General Category/ Type Category/	Mailing Address P.O. Box 440305			01 21 2011
MA US House Candidate Name Rep. Michael E. Capuano Office Sought: State: MA District: 08 Full Name (Last, First, Middle Initial) Castor for Congress Mailing Address Purpose of Disbursement FL US House Candidate Name Rep. Kathy Castor Office Sought: State: FL District: 11 Full Name (Last, First, Middle Initial) Citizens for Tom Petri Mailing Address PO Box 270 City Fond Du Lac Purpose of Disbursement Mailing Address PO Box 270 City Fond Du Lac Purpose of Disbursement Wi US House Candidate Name Rep. Kathy Castor City Fond Du Lac Purpose of Disbursement Mailing Address PO Box 270 City Fond Du Lac Purpose of Disbursement Wi US House Candidate Name Rep. Category/ Type City Fond Du Lac Wi S4936 Purpose of Disbursement Wi US House Candidate Name Rep. Category/ Type City Fond Du Lac Wi S4936 Purpose of Disbursement Wi US House Candidate Name Rep. Tom E. Petri Office Sought: X House Candidate Name Rep. Tom E. Petri Office Sought: X House Candidate Name Rep. Tom E. Petri Office Sought: X House Senate President State: Wi District: 06				Amount of Each Disbursement this Period
Candidate Name Rep. Michael E. Capuano Office Sought:	Purpose of Disbursement		•	1000.00
Rep. Michael E. Capuano Office Sought:			Category/	
Senate President State: MA District: 08 Full Name (Last, First, Middle Initial) Castor for Congress Mailing Address P.O. Box 5419 City Tampa FL 33675 Purpose of Disbursement FL US House Candidate Name Rep. Kathy Castor State: FL District: 11 Full Name (Last, First, Middle Initial) City Tampa General Office Sought: X House Other (specify) ▼ City Tampa FL 2012 X Primary General Other (specify) ▼ Transaction ID: B0D3ED910064C4. Date of Disbursement Initial D	<u></u>			
Transaction ID: B0D3ED910064C4. Castor for Congress Mailing Address P.O. Box 5419 City State: FL District: 11 Full Name (Last, First, Middle Initial) Cate of Disbursement FL US House Candidate Name Rep. Kathy Castor City State Zip Code Fresident Citizens for Tom Petri Mailing Address PO Box 270 City State Zip Code Wi 54936 Purpose of Disbursement FL Ush House Candidate Name Rep. Tom E. Petri Office Sought: X House Candidate Name Rep. Tom E. Petri Office Sought: X House Candidate Name Rep. Tom E. Petri Office Sought: X House Candidate Name Rep. Tom E. Petri Office Sought: X House Candidate Name Rep. Tom E. Petri Office Sought: X House Candidate Name Rep. Tom E. Petri Office Sought: X House Senate President State: VI District: 06 Other (specify) ▼ Amount of Each Disbursement this Perior Transaction ID: BA15B1F2916CD4: Date of Disbursement Office Sought: X House Senate President Other (specify) ▼ Amount of Each Disbursement this Perior Office Sought: X House Senate President Other (specify) ▼ Amount of Each Disbursement this Perior Office Sought: X House Senate President Other (specify) ▼ Other (specify) ▼				
Full Name (Last, First, Middle Initial) Castor for Congress Mailing Address P.O. Box 5419 City Tampa President State: FL District: 11 Full Name (Last, First, Middle Initial) Citizens for Tom Petri Mailing Address PO Box 270 City Fond Du Lac Purpose of Disbursement Will US House Candidate Name Rep. Kathy Castor City Fond Du Lac Purpose of Disbursement State: FL District: 11 Full Name (Last, First, Middle Initial) Citizens for Tom Petri Mailing Address PO Box 270 City Fond Du Lac Purpose of Disbursement Will US House Candidate Name Rep. Tom E. Petri Office Sought: X House State Xip Code Will 54936 Purpose of Disbursement Will US House Candidate Name Rep. Tom E. Petri Office Sought: X House Senate President State: Will District: 06 Disbursement For: 2012 X Primary General Category/ Type Category/ Type Amount of Each Disbursement this Perior Category/ Type Amount of Each Disbursement this Perior Category/ Type Other (specify) ▼ Amount of Each Disbursement this Perior Category/ Type Other (specify) ▼ Category/ Type Other (specify) ▼ Category/ Type				
Castor for Congress Mailing Address P.O. Box 5419 City Tampa FL 33675 Purpose of Disbursement FL US House Candidate Name Rep. Kathy Castor Office Sought: X House Senate President State: FL District: 11 Full Name (Last, First, Middle Initial) Citizens for Tom Petri Mailing Address PO Box 270 City State Zip Code Type Category/ Type Other (specify) ▼ Transaction ID: BA15B1F2916CD4: Date of Disbursement this Perior Transaction ID: BA15B1F2916CD4: Date of Disbursement Milling Address PO Box 270 City State Zip Code WI 54936 Purpose of Disbursement WI US House Candidate Name Rep. Tom E. Petri Office Sought: X House Senate President State: VI District: 06 Disbursement For: 2012 Category/ Type Category/ Type Category/ Type Category/ Type Office Sought: X House Senate President State: VI District: 06 Disbursement For: 2012 Category/ Type Office Sought: X House Senate President State: VI District: 06				
City Tampa State Tip Code FL 33675 Purpose of Disbursement FL US House Candidate Name Rep. Kathy Castor Office Sought: X House President State: FL District: 11 Full Name (Last, First, Middle Initial) Citizens for Tom Petri Mailing Address PO Box 270 City Fond Du Lac Purpose of Disbursement WI US House Candidate Name Rep. Tom E. Petri Office Sought: X House Senate WI State VIp Code WI 54936 Purpose of Disbursement WI US House Candidate Name Rep. Tom E. Petri Office Sought: X House Candidate Name Rep. Tom E. Petri Office Sought: State VI Primary VI Category/ Type Amount of Each Disbursement this Period Amount of Each Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type Other (specify) Transaction ID: BA15B1F2916CD4: Date of Disbursement Date of Disbursement Other (specify) Category/ Type Other (specify) Type Other (specify) Other (specify) Other (specify) Other (specify) Type Other (specify) Other (specify) Other (specify) Other (specify)				
Tampa FL 33675 Purpose of Disbursement FL US House Candidate Name Rep. Kathy Castor Office Sought: Senate President State: FL District: 11 Full Name (Last, First, Middle Initial) Citizens for Tom Petri Mailing Address PO Box 270 City Fond Du Lac Purpose of Disbursement WI US House Candidate Name Rep. Tom E. Petri Office Sought: X House Visit Primary Visit Primary Visit Primary Visit Primary Visit Primary Visit Vi	Mailing Address P.O. Box 5419			$\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 3 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{smallmatrix} \end{bmatrix}$
Purpose of Disbursement FL US House Candidate Name Rep. Kathy Castor Office Sought:				Amount of Each Disbursement this Period
FL US House Candidate Name Rep. Kathy Castor Office Sought:		FL 33675		1000.00
Rep. Kathy Castor Office Sought:				
Office Sought:				
State: FL District: 11 Full Name (Last, First, Middle Initial) Citizens for Tom Petri Mailing Address PO Box 270 City State Zip Code Fond Du Lac WI 54936 Purpose of Disbursement Wi US House Candidate Name Rep. Tom E. Petri Office Sought: X House Senate President State: WI District: 06 President Other (specify) ▼ Transaction ID: BA15B1F2916CD4 Date of Disbursement Mo 1	-		71	
State: FL District: 11 Full Name (Last, First, Middle Initial) Citizens for Tom Petri Mailing Address PO Box 270 City State Zip Code Fond Du Lac WI 54936 Purpose of Disbursement WI US House Candidate Name Rep. Tom E. Petri Office Sought: X House Senate President State: WI District: 06 State Zip Code WI 54936 Category/ Type Category/ Type Category/ Type Category/ Type Other (specify) ▼				
City State Zip Code Fond Du Lac WI 54936 Purpose of Disbursement WI US House Candidate Name Rep. Tom E. Petri Office Sought: X House Senate President State: WI District: 06 City State Zip Code WI 54936 Category/ Type Category/ Type Category/ Type Category/ Type Other (specify) ▼				
City State Zip Code WI 54936 Purpose of Disbursement WI US House Candidate Name Rep. Tom E. Petri Office Sought: X House Senate President President State: WI District: 06 State Zip Code WI 54936 Category/ Type Category/ Type Category/ Type Coffice Sought: X Primary General Other (specify) Type Other (specify) Type				
Fond Du Lac WI 54936 Purpose of Disbursement WI US House Candidate Name Rep. Tom E. Petri Office Sought: X House Senate President President State: WI District: 06 State: WI District: 06	Mailing Address PO Box 270			$\begin{bmatrix} 0 & 1 & 1 & 1 \\ 0 & 1 & 1 & 1 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 1 \\ 2 & 1 & 1 \end{bmatrix} $
Purpose of Disbursement WI US House Candidate Name Rep. Tom E. Petri Office Sought: Senate President State: WI District: 06 1000.00 Category/ Type Category/ Type Category/ Type Condidate Name Category/ Type				Amount of Each Disbursement this Period
Candidate Name Rep. Tom E. Petri Office Sought: X House Senate President State: WI District: 06 Category/ Type Category/ Type Other (specify) Other (specify)	Purpose of Disbursement	W1 01000		1000.00
Office Sought: X House Senate X Primary General	Candidate Name			
State: WI District: 06 Other (specify) ▼				
State: WI District: 06				
SUBTOTAL of Disbursements This Page (optional)				
F COLUMN TO THE TOTAL CONTROL	SUBTOTAL of Disbursements This Page (ontion			3000.00
TOTAL This Period (last page this line number only)		·		

		Use separate schedule((check only	
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 X 23 24 25 26 28a 28b 28c 29 30
	y Information copied from such Reports and Stator commercial purposes, other than using the n			any person f	for the purpose of soliciting contributions
\setminus	NAME OF COMMITTEE (In Full)				
	Cruise Lines International Association				
	Full Name (Last, First, Middle Initial)				Transaction ID: BD8F7CFE639634F5
	Citizens for Tom Petri				Date of Disbursement
	Mailing Address PO Box 270				$\begin{bmatrix} \begin{smallmatrix} M \\ D \end{smallmatrix} \begin{smallmatrix} M \\ D \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ D \end{smallmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} $
	City Fond Du Lac	State Zip Code WI 54936			Amount of Each Disbursement this Period
	Purpose of Disbursement VOID - WI-06 US House		Тг	•	-1000.00
	Candidate Name Rep. Tom E. Petri			ategory/ Type	
	Office Sought: X House Senate President Disbr	rrsement For: 2010 Primary X Genera Other (specify) ▼		Yes	
	State: WI District: 06	Caron (opposity)			
	Full Name (Last, First, Middle Initial) Citizens to Elect Rick Larsen				Transaction ID: B6A8A074209A84E50
	Mailing Address PO BOX 326				06 23 7 2011
	City	State Zip Code			Amount of Each Disbursement this Period
	EVERETT	WA 98206	_		
	Purpose of Disbursement WA - 2 US House				1000.00
	Candidate Name Rep. Rick Larsen			ategory/ Type	
	Office Sought: X House Senate President State: WA District: 02	xrsement For: 2012 X Primary Genera Other (specify) ▼	l		
	Full Name (Last, First, Middle Initial) Dan 10				Transaction ID: B8ABF7458943F4238 Date of Disbursement
	Mailing Address 1088 BISHOP STREE SUITE 1009	T			$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} \begin{smallmatrix} S \\ M \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} D \\ D \end{smallmatrix} \begin{smallmatrix} D \\ D \end{smallmatrix} \Big] \ / \ \begin{bmatrix} Y & Y & Y & Y & Y \\ Z & O & I & I \end{bmatrix}^{Y} $
	City HONOLULU	State Zip Code HI 96813			Amount of Each Disbursement this Period
	Purpose of Disbursement VOID - Political Contribution		ТГ		-2000.00
	Candidate Name Sen. Daniel K. Inouye			ategory/ Type	
	Office Sought: House Disbute X Senate President State: HI District:	x Primary General Other (specify)	-		
	otato. III District.				
					-2000.00

			Use sepa	rate schedule(s))K LINE reck on		AGE 31/				
ITI	EMIZED DISBURS	EMENTS		category of the Summary Page		21b 27	<u> </u>	23 28b	24 28c	25 29	\square	26 30b
	y Information copied from suc or commercial purposes, othe											
L	NAME OF COMMITTEE (In											
	Cruise Lines Internationa	al Association	า									
	Full Name (Last, First, Middle	e Initial)								0C123C	1994	 В7С
	DANPAC						Date of			Y Y Y	Y	
	Mailing Address 1088 E Suite 1	ishop Street 009					0 ^M 5 M	1	^D /	Ž01	1	
	City Honolulu		State HI	Zip Code 96813			Amount	of Each	Disburs	ement this	Perioc	k
	Purpose of Disbursement				,	-				-1000.0	0	
	VOID - PAC to PAC											
	Candidate Name				Categ Typ							
	Office Sought: House Senat		sbursement For:	2010								
	Presid		X Other (spe	General cify) ▼								
	State: District:	Ot	ther2010	•								
	Full Name (Last, First, Middle	e Initial)					Transac	tion ID:	B241	7796633	0F403	3D/
	Defazio for Congress						Date of			v	v	
	Mailing Address PO Bo	x 1316					06	[/] 2	3 /	^Y 201	1	
	City Springfield		State OR	Zip Code 97477			Amount	of Each	Disburs	ement this	Perioc	t
	Purpose of Disbursement OR - 04 US House				L.			1000.0	0			
	Candidate Name Rep. Peter A. DeFazio		Categ	-								
	Office Sought: X House		sbursement For:	2012								
	Senat Presid		X Primary Other (spe	General								
	State: OR District: (Other (spe	City) $lacksquare$								
	Full Name (Last, First, Middle Duncan for Congress	e Initial)					Transac Date of			470DA26	BB43	323
	Mailing Address PO Bo	x 2646					0 ^M 5 M	/ DO	^D /	y žo i	1 Y	
	City		State	Zip Code			Amount	of Each	Disburs	ement this	Perioc	 t
	Knoxville		TN	37901						1000.0	0	\neg
	Purpose of Disbursement TN US House				-			1000.0	Ů.	_		
	Candidate Name Rep. John J. Duncan, Jr			Cate								
	Office Sought: X House Senat Presid	e	sbursement For: X Primary Other (spe	2012 General								
	State: TN District: 0)2										
				<u> </u>						1000.0		\neg
	JBTOTAL of Disbursements											

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE N					
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b				
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full)							
Cruise Lines International Association							
Full Name (Last, First, Middle Initial) Duncan for Congress			Transaction ID: B125917665FEE4D26 Date of Disbursement				
Mailing Address PO Box 2646			06 23 7 2011				
City Knoxville	State Zip Code TN 37901		Amount of Each Disbursement this Period				
Purpose of Disbursement			1000.00				
TN - 2 US House Candidate Name		Category/					
Rep. John J. Duncan, Jr.	ement For: 2012	Туре					
	Primary General						
President State: TN District: 02	Other (specify)						
Full Name (Last, First, Middle Initial)			Transaction ID: B1B6664C78E22412B				
Friends for Harry Reid			Date of Disbursement				
Mailing Address 422 C Street, NE Lower	level		05 / 12 / 2011				
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Period				
Purpose of Disbursement VOID - NV-US Senate			-1000.00				
Candidate Name Sen. Harry Reid		Category/ Type					
	ement For: 2010 Primary X General						
X Senate President	Other (specify)						
State: NV District: Full Name (Last, First, Middle Initial)							
Friends of Barbara Boxer			Transaction ID: BDAE3CF50B7374AB Date of Disbursement				
Mailing Address PO BOX 641751			$\begin{bmatrix} 0.5 & \text{M} \\ 0.5 & \text{M} \end{bmatrix} / \begin{bmatrix} \text{D} & 1.2 \\ 1.2 & \text{D} \end{bmatrix} / \begin{bmatrix} \text{Y} & \text{Y} & \text{Y} & \text{Y} \\ 2.0 & 1.1 \end{bmatrix}$				
	State Zip Code		Amount of Each Disbursement this Period				
Los Angeles Purpose of Disbursement	CA 90064		-2000.00				
VOID - Political Contribution Candidate Name		Category/					
Sen. Barbara Boxer	Type						
Office Sought: House Disburse x Senate	ement For: 2010 Primary X General						
President State: CA District:	Other (specify) ▼						
State: CA DISTRICT.							
SUBTOTAL of Disbursements This Page (optional)		<u>\</u>	-2000.00				
TOTAL This Period (last page this line number only)							

SCHEDIII E B (FEC Form 3Y)

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	NUMBER: PAGE 33 / 44 one)
	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
any Information copied from such Reports and Stat r for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)	· · · · · · · · · · · · · · · · · · ·		
Cruise Lines International Association			
Full Name (Last, First, Middle Initial) Friends of Bennie Thompson			Transaction ID: B65A3A7BBB64A4DF7 Date of Disbursement
Mailing Address PO Box 100			$\begin{bmatrix} \begin{smallmatrix} M & 4 & M \\ 0 & 4 & M \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 1 \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix} $
City Bolton	State Zip Code MS 39041		Amount of Each Disbursement this Period
Purpose of Disbursement VOID - MS-02 US House		•	-1000.00
Candidate Name Rep. Bennie G. Thompson		Category/ Type	
Office Sought: X House Senate President State: MS District: 02	rsement For: 2010 Primary X General Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: B46037C44FAA14AF2
Friends of Bennie Thompson			Date of Disbursement
Mailing Address PO Box 100			$ \begin{bmatrix} M & 4 \\ 0 & 4 \end{bmatrix} $ $ \begin{bmatrix} D & D \\ 0 & 5 \end{bmatrix} $ $ \begin{bmatrix} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix} $
City Bolton	State Zip Code MS 39041		Amount of Each Disbursement this Period
Purpose of Disbursement MS-02 US HOUSE			2000.00
Candidate Name Rep. Bennie G. Thompson		Category/ Type	
Office Sought: X House Senate President State: MS District: 02	x Primary Quench General Other (specify)		
Full Name (Last, First, Middle Initial) Friends of Bennie Thompson			Transaction ID: B8CE1E79C9E004234 Date of Disbursement
Mailing Address PO Box 100			$\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & S \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & Y & I \end{bmatrix}$
City Bolton	State Zip Code MS 39041		Amount of Each Disbursement this Period
Purpose of Disbursement MS US House			1000.00
Candidate Name Rep. Bennie G. Thompson		Category/ Type	
Senate President	rsement For: 2012 X Primary General Other (specify) ▼		
State: MS District: 02			
Oldio. IVIO BIOLITOI. 02			

CHEDULE B (FEC FOIII 3X)		arate schedule(s)	FOR LINE (check only	NUMBER: PAGE 34 / 44
TEMIZED DISBURSEMENTS		category of the Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30
ny Information copied from such Reports and Star for commercial purposes, other than using the n				
NAME OF COMMITTEE (In Full)				
Cruise Lines International Association				
Full Name (Last, First, Middle Initial)				Transaction ID: B4100F1DF54004F18
Friends of Cliff Stearns				Date of Disbursement 0 5 1 2 2 0 1 1
Mailing Address P.O. Box 308				$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} \begin{smallmatrix} M \\ S \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D \\ D \end{smallmatrix} \begin{smallmatrix} D \\ S \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} $
City Silver Springs	State FL	Zip Code 34489		Amount of Each Disbursement this Period
Purpose of Disbursement	· · ·	04400		-1000.00
VOID - FL-06 US House Candidate Name			Category/	
Rep. Cliff B. Stearns			Type	
Office Sought: X House Disbu	rsement For:	2010 X General		
President	Other (spe			
State: FL District: 06 Full Name (Last, First, Middle Initial)				Pagga 45000400400
Friends of Cliff Stearns				Transaction ID: B80884E63612340C8 Date of Disbursement
Mailing Address P.O. Box 308				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & Q \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Q & Y \\ Q & Q & I & I \end{bmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $
City Silver Springs	State FL	Zip Code 34489		Amount of Each Disbursement this Period
Purpose of Disbursement FL - 6 US House				1000.00
Candidate Name Rep. Cliff B. Stearns			Category/ Type	
Office Sought: X House Disbu	rsement For:	2012 General		
President	Other (spe			
State: FL District: 06				
Full Name (Last, First, Middle Initial) Friends of Doc Hastings				Transaction ID: B525ED777EAA44E3 Date of Disbursement
Mailing Address PO BOX 2926				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & G \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & D & I & I \end{smallmatrix} \end{bmatrix}$
City PASCO	State WA	Zip Code 99302		Amount of Each Disbursement this Period
Purpose of Disbursement WA - 4 US House				500.00
Candidate Name Rep. Doc Hastings			Category/ Type	
Senate	X Primary	2012 General		
State: WA District: 04	Other (spe	ciiy) ♥		
· · · · · · · · · · · · · · · · · · ·				E00.00
SUBTOTAL of Disbursements This Page (option	al)			500.00

		Use separate schedule(s		PR LINE leck onl		
ITI	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 X 23 24 25 28a 28b 28c 29	
	y Information copied from such Reports and State for commercial purposes, other than using the na					
$\overline{}$	NAME OF COMMITTEE (In Full)					
\rangle	Cruise Lines International Association					
	Full Name (Last, First, Middle Initial) Friends of Frank Wolf				Transaction ID: B32F7513D3	EBA486B
					Date of Disbursement Date of Disbursement	Y Y
	Mailing Address P.O.Box 710235					
	City Herndon	State Zip Code VA 20171			Amount of Each Disbursement thi	•
	Purpose of Disbursement VOID - VA-10 US House		•		-1000.	00
	Candidate Name Rep. Frank R. Wolf		Categ Typ			
	Office Sought: X House Senate President Disbur	sement For: 2010 Primary X General				
	State: VA District: 10	Other (specify)				
	Full Name (Last, First, Middle Initial) Gibbs for Congress				Transaction ID: B90EB6549E Date of Disbursement	357647E38
	Mailing Address 6992 TR 466				$\begin{bmatrix} M & M \\ 0 & 6 \end{bmatrix}$ $\begin{bmatrix} D & D \\ 2 & 3 \end{bmatrix}$ $\begin{bmatrix} Y & Y \\ 2 & 0 \end{bmatrix}$	Í 1
	City	State Zip Code			Amount of Each Disbursement thi	s Period
	LAKEVILLE Purpose of Disbursement OH - 18 US House	OH 44638			1000.	00
	Candidate Name Rep. Bob Gibbs		Categ Typ	-		
	9 1	sement For: 2012 K Primary General Other (specify)	1 21			
	Full Name (Last, First, Middle Initial) John D. Dingell for Congress				Transaction ID: BFB82522BE Date of Disbursement	
	Mailing Address 607 14th Street, NW Suite 800				01 21 7 20	11
	City Washington	State Zip Code DC 20005			Amount of Each Disbursement thi	s Period
	Purpose of Disbursement MI US House				1000.	00
	Candidate Name Rep. John D. Dingell		Categ Typ			
		sement For: 2012 K Primary General Other (specify)	1 21			
	-				4000	00
CI	UBTOTAL of Disbursements This Page (optiona)		•	1000.	UU I

Transaction ID: BA3370BA48C7469/ Amount of Each Disbursement this Period Washington Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Category/ Type Office Sought: X House Category/ Category/ Type Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Category/ Type Other (specify) ▼ Other (specify) ▼ Other (specify) ▼ Category/ Type	SCHEDOLL B (I LC I OIIII 3X)	Use separate schedule(s)		LINE NU k only on	ne)	
NAME OF COMMITTEE (In Full) Cruise Lines International Association Full Name (Last, First, Middle Initial) John D. Dingell for Congress Mailing Address 607 14th Street, NW Suite 800 City State Zip Code Washington Pep- John D. Dingell Office Sought: X House State: MI District: 15 Full Name (Last, First, Middle Initial) John D. Dingell for Congress Mailing Address 607 14th Street, NW Suite 800 Category' Rep. John D. Dingell Office Sought: X House State: MI District: 15 Full Name (Last, First, Middle Initial) John D. Dingell Office Sought: X House State: MI District: 15 Full Name (Last, First, Middle Initial) John D. Dingell for Congress Mailing Address 607 14th Street, NW Suite 800 City State Zip Code Washington DC 20005 Purpose of Disbursement MI - 15 US House Cardidate Name Rep. John D. Dingell Office Sought: X House President State: MI District: 15 Full Name (Last, First, Middle Initial) John D. Dingell Office Sought: X House President State: MI District: 15 Full Name (Last, First, Middle Initial) State: MI District: 15 Full Name (Last, First, Middle Initial) Coffice Sought: X House President State: MI District: 15 Full Name (Last, First, Middle Initial) Coffice Sought: X House Cardidate Name Rep. Nick Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name President Coffice Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Off	TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		1b 🗍	22 X 23	\sqcup \sqcup
NAME OF COMMITTEE (In Full) Cruise Lines International Association Full Name (Last, First, Middle Initial) John D. Dingell for Congress Mailing Address 607 14th Street, NW Suite 800 City Washington DC 20005 Purpose of Disbursement Office Sought: Value 800 City Washington DC 20005 Full Name (Last, First, Middle Initial) John D. Dingell Office Sought: Value 800 City Washington District: 15 Full Name (Last, First, Middle Initial) John D. Dingell for Congress Mailing Address 607 14th Street, NW Suite 800 City Washington DC 20005 Full Name (Last, First, Middle Initial) John D. Dingell for Congress Mailing Address 607 14th Street, NW Suite 800 City Washington DC 20005 Full Name (Last, First, Middle Initial) John D. Dingell Office Sought: X House Senate President District: 15 Full Name (Last, First, Middle Initial) District: 15 Full Name (Last, First, Middle Initial) Category/ Type Other (specify) Vashington Transaction ID: BF35370BA48C7469/ Date of Disbursement this Period Amount of Each Disbursement this Period Transaction ID: BF35370BA48C7469/ Date of Disbursem						
Transaction ID: BA820155EDE824110 John D. Dingell for Congress Mailing Address 607 14th Street, NW Suite 800 City Washington Purpose of Disbursement VOID - MI-15 US House Candidate Name Rep. John D. Dingell Office Sought: State: MI District: 15 Full Name (Last, First, Middle Initial) John D. Dingell Office Sought: State: MI District: 15 Full Name (Last, First, Middle Initial) City Washington State: Zip Code Primary General Primary General Primary Ageneral Other (specify) Type Transaction ID: BA820155EDE824110 Date of Disbursement this Period Amount of Each Disbursement this Period Transaction ID: BF35370BA48C7469/ Date of Disbursement Mailing Address 607 14th Street, NW Suite 800 City Washington DC 20005 Purpose of Disbursement Mil-15 US House Candidate Name Rep. John D. Dingell Office Sought: X House President State: MI District: 15 Full Name (Last, First, Middle Initial) City Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) City Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) City Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) City Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) City Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) City Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) City Senate President State: MI District: 15 Category/ Type Transaction ID: BB31F2B66A0C849F- Date of Disbursement this Period Amount of Each Disbursement this Period Amount of Each Disbursement this Period Category/ Type Office Sought: X House Senate President State: MI District: 15 Category/ Type Office Sought: X House Senate President State: MI District: 15 Category/ Type Office Sought: X House Senate President State: MI District: 15 Category/ Type Office Sought: X House Senate Senate President State: MI District: 15 Category/ Type Office Sought: X House Senate Senate Senate President State: MI District: 1	<u>_</u>	c and address of any pointed	COMMITTEE	to solicit	CONTINUUTIONS	om sach committee
Transaction ID: BA820155EDE824110 John D. Dingell for Congress Mailing Address 607 14th Street, NW Suite 800 City Washington DC 20005 Purpose of Disbursement VID: Mit-15 US House Candidate Name Rep. John D. Dingell Office Sought: X House Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) John D. Dingell for Congress Mailing Address 607 14th Street, NW Suite 800 Transaction ID: BA820155EDE824110 Amount of Each Disbursement this Period Type Transaction ID: BF35370BA48C7469/ Date of Disbursement ID: BF35370BA48C7469/ Date of Disbursement Transaction ID: BF35370BA48C7469/ Date of Disbursement ID: Dispursement ID: Dis	` ′					
John D. Dingell for Congress Mailing Address 607 14th Street, NW Suite 800 City State Zip Code DC 20005 Purpose of Disbursement VOID - MI-15 US House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John D. Dingell Office Sought: X House Candidate Name Rep. John S. Bata State						
Mailing Address 607 14th Street, NW Suite 800 City Washington DC 20005 Purpose of Disbursement VOID - MI-15 US House Candidate Name Rep. John D. Dingell Office Sought: X House Suite 800 City Washington District: 15 Full Name (Last, First, Middle Initial) John D. Dingell for Congress Mailing Address 607 14th Street, NW Suite 800 City Washington DC 20005 Purpose of Disbursement For: 2010 Primary Ageneral President State: MI District: 15 Full Name (Last, First, Middle Initial) John D. Dingell for Congress Mailing Address 607 14th Street, NW Suite 800 City Search President DC 20005 Full Name (Last, First, Middle Initial) John D. Dingell Office Sought: X House Senate President Disbursement For: 2012 Senate Disbursement For: 2012 Senate President Dis	,					
City Washington DC 20005 Purpose of Disbursement (NOID - MH-15 US House Candidate Name President State: MI District: 15 Full Name (Last, First, Middle Initial) John D. Dingell for Congress Mailing Address 607 14th Street, NW Suite 800 City Washington DC 20005 Purpose of Disbursement MI-15 US House Candidate Name Rep. John D. Dingell Office Sought: X House President DC 20005 Full Name (Last, First, Middle Initial) John D. Dingell for Congress Mailing Address 607 14th Street, NW Suite 800 City Senate President DC 20005 Full Name (Last, First, Middle Initial) John D. Dingell Office Sought: X House Senate President DC 20005 Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 64 City Senate President Disbursement For: 2012 Mailing Address P.O. Box 64 City State Zip Code WV 25802 Purpose of Disbursement WV US House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House President Disbursement For: 2012 X Primary General President Pr	John D. Dingell for Congress			!		
Washington DC 20005 Purpose of Disbursement VOID - MI-15 US House Candidate Name Rep. John D. Dingell Office Sought:					0 5 1	2 2011
Purpose of Disbursement VOID - MI-15 US House Candidate Name Rep. John D. Dingell Office Sought:					Amount of Each	Disbursement this Period
Candidate Name Rep. John D. Dingell Office Sought:		DC 20005				-1000 00
Rep. John D. Dingell Office Sought: X House Senate Primary X General Other (specify) ▼ Transaction ID: BF35370BA48C7469A Date of Disbursement Other (specify) ▼ Transaction ID: BF35370BA48C7469A Date of Disbursement Other (specify) ▼ Transaction ID: BF35370BA48C7469A Date of Disbursement Other (specify) ▼ Amount of Each Disbursement this Period Type Office Sought: X House Senate Primary General Other (specify) ▼ Transaction ID: BF35370BA48C7469A Date of Disbursement Other (specify) ▼ Transaction ID: BF35370BA48C7469A Date of Disbursement Other (specify) ▼ Transaction ID: BF35370BA48C7469A Date of Disbursement Other (specify) ▼ Transaction ID: BF35370BA48C7469A Date of Disbursement Other (specify) ▼ Transaction ID: BF35370BA48C7469A Date of Disbursement this Period Transaction ID: BF35370BA48C7469A Date of Disbursement Other (specify) ▼ Transaction ID: BF35370BA48C7469A Date of Disbursement this Period Transaction ID: BF35370BA48C7469A Amount of Each Disbursement Other (specify) ▼ Ot	VOID - MI-15 US House		Catanan			-1000.00
Senate Prissident State: MI District: 15 Full Name (Last, First, Middle Initial) John D. Dingell for Congress Mailing Address 607 14th Street, NW Suite 800 City State Zip Code DC 20005 Purpose of Disbursement MI - 15 US House Candidate Name Rep. John D. Dingell Office Sought: X House Senate Prissident Mailing Address P.O. Box 64 City State Zip Code DC 20005 Transaction ID: BF35370BA48C7469A Date of Disbursement M				y/		
President District: 15	Office Sought: X House Disburs	ement For: 2010				
State: MI District: 15 Full Name (Last, First, Middle Initial) John D. Dingell for Congress Mailing Address 607 14th Street, NW Suite 800 City Washington DC 20005 Purpose of Disbursement MI - 15 US House Candidate Name Rep. John D. Dingell Office Sought: X House Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) Keep Nick Rahall in Congress Committee Mailing Address P.O. Box 64 City Beckley WV 25802 Purpose of Disbursement WV US House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Senate President Disbursement		, <u> </u>				
Full Name (Last, First, Middle Initial) John D. Dingell for Congress Mailing Address 607 14th Street, NW Suite 800 City Washington Purpose of Disbursement MI - 15 US House Candidate Name Rep. John D. Dingell Office Sought: Mailing Address Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) Keep Nick Rahall in Congress Committee Mailing Address P.O. Box 64 City State Zip Code WV 25802 Purpose of Disbursement Mailing Address P.O. Box 64 City State Zip Code WV 25802 Purpose of Disbursement WV US House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Senate President Disbursement For: Category/ Type Category/ Type Office Sought: X House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Senate President Disbursement For: Category/ Type Office Sought: X House Senate President Disbursement For: Category/ Type Office Sought: X Primary General Other (specify) ▼ Office Sought: X Primary General Other (specify) ▼		Other (specify) ▼				
John D. Dingell for Congress Mailing Address 607 14th Street, NW Suite 800 City State Zip Code Washington DC 20005 Purpose of Disbursement MI - 15 US House Candidate Name Rep. Nick Alahall in Congress Committee Mailing Address P.O. Box 64 Category/ Type Category/ Date of Disbursement Mailing Address P.O. Box 64 City State Zip Code Beckley WV 25802 Purpose of Disbursement WV US House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Senate President Disbursement For: 2012 Senate President Disbursement For:						DE050705 1 1005 100
Suite 800 City Washington Purpose of Disbursement MI - 15 US House Candidate Name Rep. John D. Dingell Office Sought: X House Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) Keep Nick Rahall in Congress Committee Mailling Address P.O. Box 64 City Beckley Purpose of Disbursement WV US House Cardidate Name Rep. Nick J. Rahall, II Office Sought: X House State V Primary State V Primary State V Primary Category/ Type Transaction ID: BB91F2B66A0C849F4 Date of Disbursement My U S House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Senate President Disbursement For: V US House Category/ Type Category/ Type Category/ Type Other (specify) ▼ Amount of Each Disbursement this Period Category/ Type Other (specify) Transaction ID: BB91F2B66A0C849F4 Category/ Type Amount of Each Disbursement this Period Category/ Type Other (specify)	,				Date of Disburs	ement
Washington DC 20005 Purpose of Disbursement MI - 15 US House Candidate Name Rep. John D. Dingell Office Sought:					0 6 2	23 / 2011
Purpose of Disbursement MI - 15 US House Candidate Name Rep. John D. Dingell Office Sought:	•				Amount of Each	Disbursement this Period
Candidate Name Rep. John D. Dingell Office Sought:	Purpose of Disbursement	DC 20005		\exists		1000.00
Senate	Candidate Name			y /		
Keep Nick Rahall in Congress Committee Mailing Address P.O. Box 64 City State Zip Code Beckley WV 25802 Purpose of Disbursement WV US House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Disbursement For: 2012 Senate President Disbursement For: 2012 X Primary General Other (specify) ▼	Senate X President	Primary General				
City State Zip Code Beckley WV 25802 Purpose of Disbursement WV US House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Disbursement For: 2012 Senate President Other (specify) President Amount of Each Disbursement this Period Category/ Type Category/ Type Other (specify) Other (specify)	,				Date of Disburs	ement
Beckley WV 25802 Purpose of Disbursement WV US House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Senate Senate President President WV 25802 1000.00 Category/ Type Category/ Type Other (specify) ▼	Mailing Address P.O. Box 64				05 / 0) 3
WV US House Candidate Name Rep. Nick J. Rahall, II Office Sought: X House Senate President Disbursement For: X Primary General Other (specify) V					Amount of Each	
Rep. Nick J. Rahall, II Office Sought: X House Senate President Disbursement For: X Primary General Other (specify)	WV US House					1000.00
Office Sought: X House Senate President Disbursement For: X Primary General Other (specify) ▼				y /		
	Office Sought: X House Disburse Senate X	Primary General	1 753			
		Caron (openity)				
	SUBTOTAL of Disbursements This Page (optional)			•		1000.00

1		USE	Use separate schedule(s) for each category of the				y one)						
111	EMIZED DISBURSEMENT	Det	each category of the ailed Summary Pag		21b 27	À	22 28a	X 23 28b		24 28c	\Box	25 29	26 30
	y Information copied from such Reports a or commercial purposes, other than using				y persoi		the pur	oose of		ting c		utions	
$\overline{}$	NAME OF COMMITTEE (In Full)		, , , , , , ,										
\rangle	Cruise Lines International Associa	tion											
<u>/</u>	Full Name (Last, First, Middle Initial)						Transa	ction IE): E	374C	D6DI	35B9 <i>A</i>	A 9478
	Keep Nick Rahall in Congress Cor	nmittee					Date of	Disburs		ent	/ · V	· v ·	V
	Mailing Address P.O. Box 64						0 5	ا ا	1 2	ľL	2	0 1 1	
	City Beckley	State WV	Zip Code 25802				Amoun	t of Eac	h Dis	burse	ement	this Pe	eriod
	Purpose of Disbursement VOID - WV-4 US House										-100	00.00	
	Candidate Name Rep. Nick J. Rahall, II		-										
	Office Sought: X House Senate President State: WV District: 03	Disbursement IX Prima Othe			/ре								
	Full Name (Last, First, Middle Initial)							ction IE			97 A 9	CE03	141C
	LoBiondo for Congress						M M	Disburs / D	seme	ent / N	ΥΫ́	0 1 1	Υ
	Mailing Address P.O. Box 775							J L	2 1	L	2	0 1 1	
	City Marmora	State NJ	Zip Code 08223				Amoun	t of Eac	h Dis	burse	ement	this Pe	eriod
	Purpose of Disbursement NJ US House								100	00.00			
	Candidate Name Rep. Frank A. LoBiondo		egory/ /pe										
	Office Sought: X House Senate President State: NJ District: 02	Disbursement I X Prima Othe		al									
	Full Name (Last, First, Middle Initial) LoBiondo for Congress							ction IE Disburs			5BD7	E9F3	04B8
	Mailing Address P.O. Box 775						0 4		0 1		ž	0 1 1	Y
	City Marmora	State NJ	Zip Code 08223				Amoun	t of Eac	h Dis	burse	ement	this Pe	eriod
	Purpose of Disbursement VOID - NJ-02 US House										-100	0.00	
	Candidate Name Rep. Frank A. LoBiondo				egory/ ype								
	Office Sought: X House Senate President State: NJ District: 02	Disbursement I Prima Othe			-								
	State. ING DISTINCT. UZ										-100		

SCHEDULE B (FEC FOIIII 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)	The and address of any political oc		ion continuations from such committee
Cruise Lines International Association			
Full Name (Last, First, Middle Initial)			Transaction ID: BD867FA435DED412F
LoBiondo for Congress			Date of Disbursement O 4 O 5 O 7 O 7 O 7 O 7 O 7 O 7 O 7
Mailing Address P.O. Box 775			04 05 2011
City Marmora	State Zip Code NJ 08223		Amount of Each Disbursement this Period
Purpose of Disbursement	140 00220		1000.00
NJ US HOUSE Candidate Name	[L	Catagony	
Rep. Frank A. LoBiondo	'	Category/ Type	
X	sement For: 2012 K Primary General		
President	Other (specify)		
State: NJ District: 02			
Full Name (Last, First, Middle Initial) LoBiondo for Congress			Transaction ID: B62AA0060AD1F4C4C Date of Disbursement
			05 / 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address P.O. Box 775			03 03 2011
City Marmora	State Zip Code NJ 08223		Amount of Each Disbursement this Period
Purpose of Disbursement NJ US House	TWO GGZZG	•	2000.00
Candidate Name Rep. Frank A. LoBiondo	-	Category/ Type	
	sement For: 2012		
Senate President	✓ Primary General Other (specify) ▼		
State: NJ District: 02			
Full Name (Last, First, Middle Initial) LONG LEAF PINE PAC			Transaction ID: B9A91E435F6FB404D Date of Disbursement
Mailing Address 607 14th Street, NW Suite 800			$\begin{bmatrix} 0 & 5 & M \\ 0 & 5 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 3 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 2 & 0 & 1 \\ 0 & 0 & 1 \end{bmatrix}$
City Washington	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement Political Contribution	Γ	•	1000.00
Candidate Name	L	Category/ Type	
Senate	sement For: 2011 Primary General COther (specify)		
State: District: Other			
SUBTOTAL of Disbursements This Page (optiona	1		4000.00
SODICIAL OF DISDUISEMENTS THIS Fage (Optional	/		

		Use separate schedule((check onl	v one)	
111	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 X 23 28a 28b	24 25 26 28c 29 30b
	y Information copied from such Reports and Stat or commercial purposes, other than using the na					
abla	NAME OF COMMITTEE (In Full)					
	Cruise Lines International Association					
	Full Name (Last, First, Middle Initial)					BAD8FB71E279B465A
	Lori Edwards Campaign Committee				Date of Disburse	
	Mailing Address P.O. Box 280				0 ^M 5 M / D1	2 7 2 0 1 1
	City Eagle Lake	State Zip Code FL 33839			Amount of Each I	Disbursement this Period
	Purpose of Disbursement		T			-1000.00
	VOID - FL-12 US House Candidate Name		- L	ategory/		
	Lori Edwards			Туре		
	Office Sought: X House Disbu	sement For: 2010 X Primary General	ı			
	President	Other (specify)				
	State: FL District: 12					
	Full Name (Last, First, Middle Initial) MARCO RUBIO FOR US SENATE				Transaction ID: Date of Disburse	B41CA2F0258804A79A
		0.0040.01475.405				D / Y Y Y Y
	Mailing Address 2030 SOUTH DOUGL	AS ROAD SUITE 105			0.3	2011
	City CORAL GABLES	State Zip Code FL 33134			Amount of Each I	Disbursement this Period
	Purpose of Disbursement Debt Retirement	12 33101				2000.00
	Candidate Name Marco Rubio			ategory/ Type		
	ÿ	sement For: 2010				
	χ Senate President	Primary X General Other (specify) ▼	l			
	State: FL District:	Carior (openity)				
	Full Name (Last, First, Middle Initial) MARK CRITZ FOR CONGRESS COMM	TTEE			Transaction ID: Date of Disburse	nent
	Mailing Address 551 MAIN STREET SU	ITE 120			05 0	3 2011
	City JOHNSTOWN	State Zip Code PA 15901			Amount of Each I	Disbursement this Period
	Purpose of Disbursement PA US House	171 16661	T	•		1000.00
	Candidate Name Mark Critz			ategory/ Type		
	Office Sought: X House Senate President State: PA District: 12	sement For: 2012 X Primary Genera Other (specify) ▼				
	State. 171 District. 12					

SCILEDOLL B (I LC I OIIII 3	Use separate schedule(s)	FOR LINE NUMBER: PAGE 40 / 44 (check only one)
TEMIZED DISBURSEMENT	for each category of the Detailed Summary Page	21b
		ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee
NAME OF COMMITTEE (In Full)	The name and address of any political confin	illitee to solicit contributions from such committee
Cruise Lines International Associa	tion	
Graide Einee international Accord		
Full Name (Last, First, Middle Initial)		Transaction ID: B9FEB028D530C4D7
Menendez for Senate		Date of Disbursement
Mailing Address PO Box 848		06 06 7 016 7 2011
City	State Zip Code	Amount of Each Disbursement this Period
Union City	NJ 07087	1000.00
Purpose of Disbursement NJ US Senate Candidate Name		
Sen. Robert Menendez	l l	egory/ ype
Office Sought: House	Disbursement For: 2012	
X Senate	X Primary General	
State: NJ District:	Other (specify)	
Full Name (Last, First, Middle Initial)		T
Mica for Congress		Transaction ID: B0CBDFB27465B46C Date of Disbursement
Mailing Address P.O. Box 181546)	06 6 7 2 3 7 2 0 1 1
City Casselberry	State Zip Code FL 32718	Amount of Each Disbursement this Period
Purpose of Disbursement FL - 7 US House	7.2 32710	2000.00
Candidate Name Rep. John L. Mica	l l	egory/ ype
Office Sought: X House Senate President State: FL District: 07	Disbursement For: 2012 X Primary General Other (specify) ▼	
Full Name (Last, First, Middle Initial) M-PAC		Transaction ID: BBDCE98AA70274424 Date of Disbursement
Mailing Address 607 14TH STRE	ET, NW, SUITE 800	05 12 7 2011
City WASHINGTON	State Zip Code DC 20005	Amount of Each Disbursement this Period
Purpose of Disbursement VOID - Political Contribution		-2000.00
Candidate Name	l l	egory/ ype
Office Sought: House Senate President	Disbursement For: 2010 Primary General X Other (specify)	
	Other2010	
State: District:		
State: District:		1000.00

		Use separate schedule(s)		ck only	NUMBER: PAGE 41 / 4 y one)			1 / 44	14	
Ш	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b [27	22 > 28a	23 28b	24 28		5 9	26 30b
	r Information copied from such Reports and Stat or commercial purposes, other than using the na									•
	NAME OF COMMITTEE (In Full)									
	Cruise Lines International Association									
	Full Name (Last, First, Middle Initial) People for Patty Murray				Transac Date of I			5FB2C ²	7B734	4DC7
	Mailing Address P.O. Box 3662				0 5 M		D /	y žo	1 1 Y	
	City Seattle	State Zip Code WA 98124			Amount	of Each	Disbur	sement t	nis Peri	od
	Purpose of Disbursement VOID - WA-US Senate	00121						-2000	0.00	
	Candidate Name Sen. Patty Murray		Catego							
	X Senate President	sement For: 2010 Primary X General Other (specify) ▼								
	State: WA District: Full Name (Last, First, Middle Initial)				Transac	tion ID:	B67	10D27F	/6ΔF/	17FC
	Rangel for Congress				Date of [+/10
	Mailing Address P.O. Box 5577				0 4		1	20	111	
	City MANHATTANVILLE St	State Zip Code NY 10027			Amount	of Each	Disbur	• • •		od
	Purpose of Disbursement VOID - NY-15 US House							-1000	0.00	
	Candidate Name Rep. Charles B. Rangel		Catego Type	-						
	Office Sought: X House Senate President State: NY District: 15	sement For: 2010 X Primary General Other (specify)								
	Full Name (Last, First, Middle Initial) Rangel for Congress				Transac Date of [Disburse	ement	97707C	242F4	1190E
	Mailing Address P.O. Box 5577				0 4	[′] 0	5	y žo	11	
	City MANHATTANVILLE St	State Zip Code NY 10027			Amount	of Each	Disbur	sement t	nis Peri	od
	Purpose of Disbursement NY-15 US HOUSE							2000	0.00	
	Candidate Name Rep. Charles B. Rangel		Catego Type							
	Office Sought: X House Senate President State: NY District: 15	sement For: 2012 X Primary General Other (specify)								
	JBTOTAL of Disbursements This Page (optional	Λ.		•				-1000	00	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE N	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) Cruise Lines International Association			
Full Name (Last, First, Middle Initial) Rangel for Congress			Transaction ID: B58ABF56CE04C473F Date of Disbursement
Mailing Address P.O. Box 5577			$\begin{bmatrix}\begin{smallmatrix}M\\D5\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\D0\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\D0\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\D0\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}D\\D0\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}D\\D0\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}D\\D0\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}D\\D0\end{smallmatrix}\end{bmatrix}^M [DD]^M [D$
	State Zip Code NY 10027		Amount of Each Disbursement this Period
Purpose of Disbursement NY US House			1000.00
Candidate Name Rep. Charles B. Rangel		Category/ Type	
Senate X President	ement For: 2012 Primary General Other (specify)		
State: NY District: 15 Full Name (Last, First, Middle Initial) Rangel for Congress			Transaction ID: BA59B18E8DC274BE
Mailing Address P.O. Box 5577			Date of Disbursement 0 5 0 0 1 2 The property of the prop
,	State Zip Code NY 10027		Amount of Each Disbursement this Period
Purpose of Disbursement VOID - NY-15 US House		• •	-1000.00
Candidate Name Rep. Charles B. Rangel		Category/ Type	
	ement For: 2010 Primary General Other (specify)		
Full Name (Last, First, Middle Initial) Rangel for Congress			Transaction ID: B8C436154AB7E4724 Date of Disbursement
Mailing Address P.O. Box 5577			06 06 7 23 7 2011
	State Zip Code NY 10027		Amount of Each Disbursement this Period
Purpose of Disbursement NY - 15 US House			2000.00
Candidate Name Rep. Charles B. Rangel		Category/ Type	
Senate X President	ement For: 2012 Primary General Other (specify)		
State: NY District: 15 SUBTOTAL of Disbursements This Page (optional) .			2000.00
TOTAL This Period (last page this line number only)			

CHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	FOR LINE (check only	
EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
ny Information copied from such Reports and Stater		any person fo	or the purpose of soliciting contributions
for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	e and address of any political col	mmittee to soi	icit contributions from such committee
Cruise Lines International Association			
Full Name (Last, First, Middle Initial) Ros-Lehtinen for Congress			Transaction ID: B6CD73D036B054991 Date of Disbursement
Mailing Address PO Box 52-2784			$\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & S \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & 1 & 1 \end{smallmatrix} Y$
City Miami	State Zip Code FL 33152		Amount of Each Disbursement this Period
Purpose of Disbursement FL US House			1000.00
Candidate Name Rep. Ileana Ros-Lehtinen		Category/ Type	
Senate X President	ement For: 2012 Primary General Other (specify)		
State: FL District: 18 Full Name (Last, First, Middle Initial)			Transaction ID: B0AA0E7C629C4449A
Ros-Lehtinen for Congress			Date of Disbursement
Mailing Address PO Box 52-2784			05
City Miami	State Zip Code FL 33152		Amount of Each Disbursement this Period
Purpose of Disbursement VOID - FL-18 US House			-1000.00
Candidate Name Rep. Ileana Ros-Lehtinen		Category/ Type	
Office Sought: X House Senate President State: FL District: 18	ement For: 2010 Primary X General Other (specify)		
Full Name (Last, First, Middle Initial) SANDY ADAMS FOR CONGRESS			Transaction ID: B48E7EFD4E06B4CB Date of Disbursement
Mailing Address PO BOX 1566			$\begin{bmatrix} M 5^{M} \\ 0^{T} 5^{M} \end{bmatrix} / \begin{bmatrix} D 0^{D} \\ 0^{T} 3 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2^{T} & 0^{T} & 1^{Y} \end{bmatrix}$
City ORLANDO	State Zip Code FL 32802		Amount of Each Disbursement this Period
Purpose of Disbursement FL US House			1000.00
Candidate Name Sandy Adams		Category/ Type	
	ement For: 2012 Primary General Other (specify)		
State. I L DISTIBLE 24			1000.00

A.

В.

District: 06

or for commercial purposes, other than using the name a		ss of any political			28a for the pur plicit contri		solicitir			s	26 30b	
NAME OF COMMITTEE (In Full) Cruise Lines International Association												
Full Name (Last, First, Middle Initial) Serrano for Congress Mailing Address PO Box 5577					Date o	f Disburs	semen	t	2 0 1		BC4	- !A4E
	ate IY	Zip Code 10027			Amoui	nt of Eac	h Disb		ent this		od	-
VOID - NY-16 US House Candidate Name Rep. Jose E. Serrano				egory/			•					
	ent For: Primary Other (spe	2010 X General ecify)		·								
Full Name (Last, First, Middle Initial) Upton for All of Us					Date o	action IE f Disburs	semen	t			IOEC	BBA
Mailing Address PO Box 490					0 5		03	/ L	ž 0 1	1		
City Sı Saint Joseph M	tate	Zip Code 49085			Amoui	nt of Eac	h Disb	-			d	-
Purpose of Disbursement MI US House Candidate Name			Cate	egory/	L	•		1	000.00)		
Rep. Fred Upton Office Sought: X House Disbursem Senate X F	ent For: Primary Other (spe	2012 General		pe	_							

SUBTOTAL of Disbursements This Page (optional)	•	0.00
TOTAL This Period (last page this line number only)	•	15500.00

State: MI