

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines
Cruise Lines International Association PAC

ADDRESS (number and street) 2111 Wilson Boulevard 8th Floor
Check if different than previously reported. (ACC) Arlington VA 22201

2. FEC IDENTIFICATION NUMBER C00432393
3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report
(b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)
(c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12G)
(d) 30-Day Post -Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 03 01 2008 through 03 31 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer J. Michael Crye
Signature of Treasurer Electronically Filed by J. Michael Crye Date 04 18 2008

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

Office Use Only
FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Cruise Lines International Association PAC

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		10730.00
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	2725.00									
(c) Total Receipts (from Line 19)	43260.00	43260.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	45985.00	53990.00								
7. Total Disbursements (from Line 31)	15000.00	23005.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	30985.00	30985.00								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. 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**

Write or Type Committee Name
Cruise Lines International Association PAC

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	42200.00	42200.00
(i) Itemized (use Schedule A)	1060.00	1060.00
(ii) Unitemized	43260.00	43260.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	43260.00	43260.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. 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
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	43260.00	43260.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	43260.00	43260.00

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. 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	5.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	5.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	23000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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
29. Other Disbursements.....	0.00	0.00
30. 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
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	15000.00	23005.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15000.00	23005.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	43260.00	43260.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	43260.00	43260.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	5.00
37. 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	5.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC

A.	Full Name (Last, First, Middle Initial) Micky Arison		Date of Receipt
	Mailing Address 999 Collins Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 28 / 2008
	City	State	Zip Code
	Bal Harbour	FL	33134
	FEC ID number of contributing federal political committee. C		Transaction ID: 80411.C3276
Name of Employer Carnival Corporation		Occupation Chairman & CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00
			Receipt

B.	Full Name (Last, First, Middle Initial) Robert Bender		Date of Receipt
	Mailing Address 1610 NE 105th St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 25 / 2008
	City	State	Zip Code
	Miami	FL	33138
	FEC ID number of contributing federal political committee. C		Transaction ID: 80328.C3267
Name of Employer Carnival Corporation		Occupation Marketing Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
			Receipt

C.	Full Name (Last, First, Middle Initial) David Bernstein		Date of Receipt
	Mailing Address 12000 S.W. 90th Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 20 / 2008
	City	State	Zip Code
	Miami	FL	33176
	FEC ID number of contributing federal political committee. C		Transaction ID: 80328.C3255
Name of Employer Carnival Corporation		Occupation Sr. Vice President & CFO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 3500.00
			Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 9000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 18
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC

A.

Full Name (Last, First, Middle Initial)
Diana Block

Mailing Address 3002 NE 20th Street

City State Zip Code
Aventura FL 33180

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

Name of Employer Occupation
Royal Caribbean Cruises Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 28 / 2008

Transaction ID: 80411.C3274

Amount of Each Receipt this Period
1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
James R. Border

Mailing Address 17828 N.W. 15th Street

City State Zip Code
Pembroke Pines FL 33029

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

Name of Employer Occupation
Carnival Cruise Lines Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2008

Transaction ID: 80328.C3268

Amount of Each Receipt this Period
1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Brian Brennan

Mailing Address 1600 Victoria Pointe Circle

City State Zip Code
Weston FL 33327

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

Name of Employer Occupation
Carnival Corporation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: 80328.C3257

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 18
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC

A.

Full Name (Last, First, Middle Initial)
Gerald R. Cahill

Mailing Address 14641 Mustang Trail

City State Zip Code
Fort Lauderdale FL 33330

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

Name of Employer Occupation
Carnival Corporation Chief Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2008

Transaction ID: 80328.C3271

Amount of Each Receipt this Period
5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Amilcar Cascais

Mailing Address 2665 NE 26th AVENUE

City State Zip Code
Fort Lauderdale FL 33306

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

Name of Employer Occupation
Carnival Cruise Lines Vice President Tour Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 28 / 2008

Transaction ID: 80411.C3278

Amount of Each Receipt this Period
250.00

Receipt

C.

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

Mailing Address 450 W. Matheson Drive

City State Zip Code
Key Biscayne FL 33149-2718

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

Name of Employer Occupation
Carnival Corporation Senior Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2008

Transaction ID: 80328.C3270

Amount of Each Receipt this Period
2000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **7250.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC

A.	Full Name (Last, First, Middle Initial) Thomas M. Dow	Date of Receipt MM / DD / YYYY 03 / 20 / 2008
	Mailing Address 1818 Ontario Pl., NW	Transaction ID: 80328.C3252
	City State Zip Code Washington DC 20009	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Princess Cruises	Occupation Vice President Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Douglas F. Eney	Date of Receipt MM / DD / YYYY 03 / 20 / 2008
	Mailing Address 317 Palm Street	Transaction ID: 80328.C3243
	City State Zip Code Hollywood FL 33019	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Carnival Cruise Lines	Occupation VP, Systems & Tech.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Howard Frank	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 445 Grand Bay Drive	Transaction ID: 80411.C3275
	City State Zip Code Key Biscayne FL 33149	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Carnival Corporation	Occupation Vice Chairman & COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	10500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 10 / 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC

A. Full Name (Last, First, Middle Initial)
Victoria L. Freed
Mailing Address 2677 Riviera Court
City Weston State FL Zip Code 33332
FEC ID number of contributing federal political committee. **C**
Name of Employer Carnival Cruise Lines Occupation Sr. VP Sales & Marketing
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt 03 / 25 / 2008
Transaction ID: 80328.C3263
Amount of Each Receipt this Period 350.00
Receipt

B. Full Name (Last, First, Middle Initial)
Adam Goldstein
Mailing Address 4321 Santa Maria St.
City Coral Gables State FL Zip Code 33146
FEC ID number of contributing federal political committee. **C**
Name of Employer Royal Caribbean Cruises Occupation EVP, Brand Operations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt 03 / 20 / 2008
Transaction ID: 80328.C3245
Amount of Each Receipt this Period 5000.00
Receipt

C. Full Name (Last, First, Middle Initial)
Donald Habeger
Mailing Address 9300 View Drive
City Juneau State AK Zip Code 99801
FEC ID number of contributing federal political committee. **C**
Name of Employer Royal Caribbean Cruises Occupation Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00
Date of Receipt 03 / 25 / 2008
Transaction ID: 80328.C3265
Amount of Each Receipt this Period 1250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 6600.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 11 / 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC

A. Full Name (Last, First, Middle Initial)
Eleni Kalisch

Mailing Address 1925 Brickell Ave #115

City State Zip Code
Miami FL 33129

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

Name of Employer Occupation
Royal Caribbean Cruises VP - Congressional Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: 80328.C3244

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Douglas R. Santoni

Mailing Address 4100 El Prado Blvd

City State Zip Code
Miami FL 33133

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

Name of Employer Occupation
Royal Caribbean Cruises VP Revenue Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2008

Transaction ID: 80328.C3266

Amount of Each Receipt this Period
2000.00

Receipt

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

Mailing Address 4172 Douglas Road

City State Zip Code
Coconut Grove FL 33133

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

Name of Employer Occupation
Carnival Corporation VP, Risk Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: 80328.C3256

Amount of Each Receipt this Period
650.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **5150.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 18
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC

A.

Full Name (Last, First, Middle Initial)
Terry L. Thornton

Mailing Address 6901 SW 136th Street

City State Zip Code
Miami FL 33156

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

Name of Employer Occupation
Carnival Cruise Lines VP Marketing & Planning

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2008

Transaction ID: 80328.C3269

Amount of Each Receipt this Period
500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Larry Trailer

Mailing Address 140 Bonaventure Blvd., Apt 204

City State Zip Code
Weston FL 33326

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

Name of Employer Occupation
Carnival Corporation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2008

Transaction ID: 80328.C3259

Amount of Each Receipt this Period
250.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Guillermo Villa

Mailing Address 5774 SW 131 Terrace

City State Zip Code
Pinecrest FL 33156

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

Name of Employer Occupation
Royal Caribbean Cruises VP - Total Rewards

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: 80328.C3249

Amount of Each Receipt this Period
350.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 13 / 18	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC

A.	Full Name (Last, First, Middle Initial) William Wright		Date of Receipt																					
	Mailing Address 6051 N. Ocean Drive #1706		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	0	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3	/	2	0	/	2	0	0	8														
	City	State	Zip Code		Transaction ID: 80328.C3250																			
	Hollywood	FL	33019																					
FEC ID number of contributing federal political committee.		<table border="1"> <tr> <td>C</td> </tr> </table>		C	Amount of Each Receipt this Period																			
C																								
Name of Employer Royal Caribbean Cruises		Occupation SVP Marine Opps		<table border="1"> <tr> <td>350.00</td> </tr> </table>	350.00																			
350.00																								
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		Receipt																				
		<table border="1"> <tr> <td>350.00</td> </tr> </table>		350.00																				
350.00																								

SUBTOTAL of Receipts This Page (optional)	▶	<table border="1"> <tr> <td>350.00</td> </tr> </table>	350.00
350.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"> <tr> <td>42200.00</td> </tr> </table>	42200.00
42200.00			

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC

<p>A. Full Name (Last, First, Middle Initial) Berkley for Congress</p> <p>Mailing Address 3069 Conquista Court</p> <p>City Las Vegas State NV Zip Code 89129-</p> <p>Purpose of Disbursement NV-01 US HOUSE</p> <p>Candidate Name SHELLEY BERKLEY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 01</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80411.E1757</p> <p>Date of Disbursement 03 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>NV-01 US HOUSE</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Corrine Brown</p> <p>Mailing Address 3109 River Bend Court, D102</p> <p>City Laurel State MD Zip Code 20724-</p> <p>Purpose of Disbursement FL-03 US HOUSE</p> <p>Candidate Name CORRINE BROWN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 03</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80411.E1760</p> <p>Date of Disbursement 03 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>FL-03 US HOUSE</p>
<p>C. Full Name (Last, First, Middle Initial) Castor for Congress</p> <p>Mailing Address P.O. Box 5419</p> <p>City Tampa State FL Zip Code 33675-</p> <p>Purpose of Disbursement FL-11 US HOUSE</p> <p>Candidate Name KATHY CASTOR</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 11</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80411.E1747</p> <p>Date of Disbursement 03 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>FL-11 US HOUSE</p>

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC

A. Full Name (Last, First, Middle Initial) Coble for Congress Mailing Address P.O. Box 1177 City Greensboro State NC Zip Code 27402- Purpose of Disbursement NC-06 US HOUSE Candidate Name JOHN HOWARD COBLE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80411.E1748 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 Category/Type NC-06 US HOUSE
B. Full Name (Last, First, Middle Initial) Cummings for Congress Campaign Committee Mailing Address PO BOX 1631 City Baltimore State MD Zip Code 21203- Purpose of Disbursement MD-07 US HOUSE Candidate Name ELIJAH E CUMMINGS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 07 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80411.E1749 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 Category/Type MD-07 US HOUSE
C. Full Name (Last, First, Middle Initial) John D Dingell for Congress Committee Mailing Address PO Box 75214 City Washington State DC Zip Code 20013- Purpose of Disbursement MI-15 US HOUSE Candidate Name JOHN D DINGELL Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 15 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80411.E1750 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 Category/Type MI-15 US HOUSE

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

**SCHEDULE B (FEC Form 3X)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC

A.	Full Name (Last, First, Middle Initial) LoBiondo for Congress Mailing Address PO Box 775 City Marmora State NJ Zip Code 08223- Purpose of Disbursement NJ-02 US HOUSE Candidate Name FRANK A LOBIONDO Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 02 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80411.E1758 Date of Disbursement 03 / 31 / 2008	Amount of Each Disbursement this Period 1000.00 NJ-02 US HOUSE
B.	Full Name (Last, First, Middle Initial) Moran for Congress Mailing Address P.O. Box 2518 City Alexandria State VA Zip Code 22301- Purpose of Disbursement VA-08 US HOUSE Candidate Name JAMES P MORAN, JR Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 08 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80411.E1761 Date of Disbursement 03 / 31 / 2008	Amount of Each Disbursement this Period 1000.00 VA-08 US HOUSE
C.	Full Name (Last, First, Middle Initial) Murtha for Congress Committee Mailing Address BT Financial Plaza; STe 220 City Johnstown State PA Zip Code 15901- Purpose of Disbursement PA-12 US HOUSE Candidate Name JOHN P MURTHA Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80411.E1745 Date of Disbursement 03 / 31 / 2008	Amount of Each Disbursement this Period 2000.00 PA-12 US HOUSE

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC

A.	Full Name (Last, First, Middle Initial) National Republican Cong. Comm.	Transaction ID: 80411.E1746 Date of Disbursement 03 / 31 / 2008
	Mailing Address 320 1st St SE	Amount of Each Disbursement this Period 2000.00
	City Washington State DC Zip Code 20003-1838	
	Purpose of Disbursement PAC TO PPC	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Other	PAC TO PPC

B.	Full Name (Last, First, Middle Initial) Serrano for Congress	Transaction ID: 80411.E1751 Date of Disbursement 03 / 31 / 2008
	Mailing Address PO Box 5577; Manhattanville Statio	Amount of Each Disbursement this Period 1000.00
	City New York State NY Zip Code 10027-	
	Purpose of Disbursement NY-16 US HOUSE	Category/ Type
	Candidate Name JOSE E SERRANO	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 16	NY-16 US HOUSE

C.	Full Name (Last, First, Middle Initial) Bill Shuster for Congress	Transaction ID: 80411.E1759 Date of Disbursement 03 / 31 / 2008
	Mailing Address PO Box 27	Amount of Each Disbursement this Period 1000.00
	City Hollidaysburg State PA Zip Code 16648-	
	Purpose of Disbursement PA-09 US HOUSE	Category/ Type
	Candidate Name WILLIAM F SHUSTER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 09	PA-09 US HOUSE

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC

A.

Full Name (Last, First, Middle Initial)
Friends of Bennie Thompson

Mailing Address PO Box 100

City Bolton State MS Zip Code 39041-

Purpose of Disbursement
MS-02 US HOUSE

Candidate Name
BENNIE G THOMPSON

Office Sought: House
 Senate
 President

State: MS District: 02

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: 80411.E1762

Date of Disbursement

/ /

Amount of Each Disbursement this Period

MS-02 US HOUSE

SUBTOTAL of Disbursements This Page (optional) ►

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