**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Cruise Lines International Association PAC (CLIA PAC) 1201 F Street NW ADDRESS (number and street) Suite 250 (Check if address is changed) Washington 20004 DC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address jpark@cruising.org is changed) Optional Second E-Mail Address jhuynh@cruising.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00432393 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Park, Jason, , Date 01 19 2024 Signature of Treasurer Park, Jason, , , NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC <b>Form 1</b> (Revised 03/2022)	Page <b>2</b>			
TYPE OF COMMITTEE:				
Candidate Committee:				
(a) This committee is a principal campaign committee. (Complete the candidate information	ation below.)			
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
Name of Candidate				
Candidate Office Party Affiliation Sought: House Senate	State President District			
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate				
Party Committee:				
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party			
Political Action Committee (PAC):				
(e) X This committee is a separate segregated fund. (Identify connected organization on	line 6.) Its connected organization is a:			
Corporation Corporation w/o Capital Stock	Labor Organization			
Membership Organization X Trade Association	Cooperative			
In addition, this committee is a Lobbyist/Registrant PAC.				
(f) This committee supports/opposes more than one Federal candidate, and is NOT a committee. (i.e., nonconnected committee)	separate segregated fund or party			
In addition, this committee is a Lobbyist/Registrant PAC.				
In addition, this committee is a Leadership PAC. (Identify sponsor on line	6.)			
(g) This committee is an independent expenditure-only political committee (Super PAC)	).			
In addition, this committee is a Lobbyist/Registrant PAC.				
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).				
In addition, this committee is a Lobbyist/Registrant PAC.				
Joint Fundraising Representative:				
(i) This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, at least one of which is an authorized committee of a fee	•			
This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.				
Committees Participating in Joint Fundraiser				
1.	С			
2.	C			

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V	Vrite or Type Committee Name	amotional Apposition DAG	(CLIA DAC)	
_		ernational Association PAC (	•	
6.		ganization, Affiliated Committee, Joint Fundr	aising Representative, or Leade	rship PAC Sponsor
	CKUISE LINES IN IE	RNATIONAL ASSOCIATION INC.		
	Mailing Address	1201 F St NW		
	Mailing Address	Suite 250		
		<sub>I</sub> Washington	DC   20004	
		Ytasınıştırı		
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship: X Connected	Organization Affiliated Organization Join	nt Fundraising Representative	Leadership PAC Sponso
	_			-
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) a	and position of the person in posses	sion of committee
	Huynh, Jen	nifer		
	Full Name	inici,,,		
	Mailing Address	1201 F Street NW		
	-	STE 250		
		Washington	DC 20004	
		CITY A	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Custodian of Records		elephone number 202 - [	285
				_
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasussistant treasurer).	asurer of the committee; and the r	name and address of
	Full Name Park, Jasor	1, , ,		
	of Treasurer			
	Mailing Address	1201 F Street NW		
		Suite 250		
		Washington	DC 20004	
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	SVP Government Affai		elephone number 202 - [	759 - 9316

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Full Name of Designated Agent				
Mailing Address				
Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲		
	Telephone number			
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.				
Name of Bank, Depository, etc.				
	BANK OF AMERICA			
Mailing Address	PO BOX 25118			
	Tampa FL 3362	22		
	CITY ▲ STATE ▲	ZIP CODE ▲		
Name of Bank, Depository, etc.				
Mailing Address				
	CITY ▲ STATE ▲	ZIP CODE ▲		

## : 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: F1A Transaction ID:

Change of Treasurer and adding additional contact email.

Form/Schedule: Transaction ID: