

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 12  
(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

**A.** Full Name (Last, First, Middle Initial)  
Myles Cyr

Mailing Address 11570 SW 95th Ave

City State Zip Code  
Miami FL 33176-4222

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Carnival Corporation VP Chief Info. Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** C3303

Amount of Each Receipt this Period 500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Terry Dale

Mailing Address 1830 South Ocean Drive, Apt 3503

City State Zip Code  
Hallandale FL 33009

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Cruise Lines International Ass President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** C3295

Amount of Each Receipt this Period 5000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Peter Frisken

Mailing Address 13959 Geranium PI

City State Zip Code  
Wellington FL 33414-8657

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Carnival Corporation VP Maritime Auditor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY  
04 / 16 / 2008

**Transaction ID:** C3287

Amount of Each Receipt this Period 250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 5750.00

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