

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
International Council of Cruise Lines Political Action Committee

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

2. **FEC IDENTIFICATION NUMBER** C00303073
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2006 through 09 30 2006

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 07 16 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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
International Council of Cruise Lines Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		25893.69
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	25385.09									
(c) Total Receipts (from Line 19)	1300.00	74791.40								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	26685.09	100685.09								
7. Total Disbursements (from Line 31)	14500.00	88500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	12185.09	12185.09								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	11500.00									
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
International Council of Cruise Lines Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	1000.00	67357.40
(i) Itemized (use Schedule A)		
(ii) Unitemized	300.00	7434.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1300.00	74791.40
(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)	1300.00	74791.40
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))	1300.00	74791.40
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1300.00	74791.40

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	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14500.00	88500.00
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))..	14500.00	88500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14500.00	88500.00

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)	1300.00	74791.40
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1300.00	74791.40
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
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	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 15
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
International Council of Cruise Lines Political Action Committee

A. Full Name (Last, First, Middle Initial)
Brendan Corrigan

Mailing Address 10718 Garden Ridge Ct

City State Zip Code
Davie FL 33328-7300

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

Name of Employer Occupation
Carnival Cruise Lines VP Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	9	/	2	0	0	6

Transaction ID: C3025

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	1000.00

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)

<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)
International Council of Cruise Lines Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Sharp Pencil PAC</p> <p>Mailing Address 2875 Towerview Rd Suite 1000</p> <p>City Herndon State VA Zip Code 20171-5403</p> <p>Purpose of Disbursement PAC TO PAC</p> <p>Candidate Name SHARP PENCIL PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E1448 Date of Disbursement 08 / 08 / 2006</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p>PAC TO PAC</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of George Allen</p> <p>Mailing Address PO Box 6859</p> <p>City Arlington State VA Zip Code 22206-0859</p> <p>Purpose of Disbursement VA/US HOUSE G2006</p> <p>Candidate Name GEORGE ALLEN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 00</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E1433 Date of Disbursement 09 / 22 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>VA/US HOUSE G2006</p>
<p>C. Full Name (Last, First, Middle Initial) Capuano for Congress</p> <p>Mailing Address P.O. Box 440305</p> <p>City Somerville State MA Zip Code 02144-</p> <p>Purpose of Disbursement VOIDED CHK Q106</p> <p>Candidate Name MICHAEL E CAPUANO</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E1768 Date of Disbursement 09 / 30 / 2006</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>VOIDED CHK Q106</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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<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)
International Council of Cruise Lines Political Action Committee

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 VOIDED CHK ORG RPT Q206 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: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E1769 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2006
	Amount of Each Disbursement this Period -1000.00 VOIDED CHK ORG RPT Q206

B. 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 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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E1443 Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2006
	Amount of Each Disbursement this Period 1000.00

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 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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E1631 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2006
	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<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)
International Council of Cruise Lines Political Action Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Friends of Byron Dorgan</p> <p>Mailing Address P.O. Box 871</p> <p>City Bismarck State ND Zip Code 58502-</p> <p>Purpose of Disbursement VOIDED CHK ORG RPT Q205</p> <p>Candidate Name BYRON L DORGAN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E1765 Date of Disbursement 09 / 30 / 2006</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>VOIDED CHK ORG RPT Q205</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) KOMPAC</p> <p>Mailing Address PO BOX 20209</p> <p>City Alexandria State VA Zip Code 22320-</p> <p>Purpose of Disbursement PAC TO PAC</p> <p>Candidate Name KEEP OUR MISSION PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E1447 Date of Disbursement 08 / 08 / 2006</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>PAC TO PAC</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Hastings for Congress</p> <p>Mailing Address P.O. BOX 100277</p> <p>City Fort Lauderdale State FL Zip Code 33310-</p> <p>Purpose of Disbursement FL/US HOUSE P2006</p> <p>Candidate Name ALCEE L HASTINGS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 23</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E1480 Date of Disbursement 08 / 08 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>FL/US HOUSE P2006</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

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)

PAGE 10 / 15

<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)
International Council of Cruise Lines Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Knollenberg for Congress</p> <p>Mailing Address 31000 Telegraph Road #110</p> <p>City Bingham Farms State MI Zip Code 48025-</p> <p>Purpose of Disbursement VOIDED CHK ORG RPT Q205</p> <p>Candidate Name JOSEPH K. KNOLLENBERG</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 09</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E1766 Date of Disbursement 09 / 30 / 2006</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>VOIDED CHK ORG RPT Q205</p>
<p>B. Full Name (Last, First, Middle Initial) LoBiondo for Congress</p> <p>Mailing Address PO Box 775</p> <p>City Marmora State NJ Zip Code 08223-</p> <p>Purpose of Disbursement</p> <p>Candidate Name FRANK A LOBIONDO</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 02</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E1452 Date of Disbursement 08 / 08 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) New Republican Majority Fund</p> <p>Mailing Address 201 N. Union Street Suite 530</p> <p>City Alexandria State VA Zip Code 22314-</p> <p>Purpose of Disbursement PAC TO PAC</p> <p>Candidate Name NEW REPUBLICAN MAJORITY FUND</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E1626 Date of Disbursement 09 / 14 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>PAC TO PAC</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

FOR LINE NUMBER:
(check only one)

<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)
International Council of Cruise Lines Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Friends of Dick Lugar</p> <p>Mailing Address 47 S. Meridian St. Suite 200</p> <p>City Indianapolis State IN Zip Code 46204-</p> <p>Purpose of Disbursement IN/US SENATE P2006</p> <p>Candidate Name RICHARD G LUGAR</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 00</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E1430 Date of Disbursement 07 / 05 / 2006</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>IN/US SENATE P2006</p>
<p>B. Full Name (Last, First, Middle Initial) Martinez for Senate</p> <p>Mailing Address 610 S. Boulevard</p> <p>City Tampa State FL Zip Code 33606-</p> <p>Purpose of Disbursement VOIDED CHK ORG RPT Q305</p> <p>Candidate Name MEL MARTINEZ</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E1767 Date of Disbursement 09 / 30 / 2006</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>VOIDED CHK ORG RPT Q305</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Jim Oberstar</p> <p>Mailing Address 1017 8th St NE</p> <p>City Washington State DC Zip Code 20002-3620</p> <p>Purpose of Disbursement</p> <p>Candidate Name JAMES L OBERSTAR</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 08</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E1654 Date of Disbursement 09 / 15 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

500.00

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

**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)

<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)
International Council of Cruise Lines Political Action Committee

A. Full Name (Last, First, Middle Initial) Citizens for Tom Petri <hr/> Mailing Address PO Box 270 <hr/> City State Zip Code Fond Du Lac WI 54936- <hr/> Purpose of Disbursement <hr/> Candidate Name TOM PETRI <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 06 <hr/> Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E1487 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Rangel for Congress <hr/> Mailing Address 2030 ALLEN PLACE NW <hr/> City State Zip Code Washington DC 20009- <hr/> Purpose of Disbursement <hr/> Candidate Name CHARLES B RANGEL <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 <hr/> Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E1603 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Serrano for Congress <hr/> Mailing Address PO Box 5577; Manhattanville Statio <hr/> City State Zip Code New York NY 10027- <hr/> Purpose of Disbursement <hr/> Candidate Name JOSE E SERRANO <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 16 <hr/> Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E1612 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<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)
International Council of Cruise Lines Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Friends of Clay Shaw</p> <p>Mailing Address PO Box 2188</p> <p>City Fort Lauderdale State FL Zip Code 33303-</p> <p>Purpose of Disbursement</p> <p>Candidate Name E CLAY SHAW, JR</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E1779 Date of Disbursement 09 / 15 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Citizens for Arlen Specter</p> <p>Mailing Address 426 C St., NE Carriage House</p> <p>City Washington State DC Zip Code 20002-</p> <p>Purpose of Disbursement PA/US SENATE P2010</p> <p>Candidate Name ARLEN SPECTER</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E1434 Date of Disbursement 09 / 15 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>PA/US SENATE P2010</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Cliff Stearns</p> <p>Mailing Address P.O. Box 308</p> <p>City Silver Springs State FL Zip Code 34489-</p> <p>Purpose of Disbursement</p> <p>Candidate Name CLIFFORD B STEARNS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 06</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E1681 Date of Disbursement 09 / 15 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<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)
International Council of Cruise Lines Political Action Committee

A.	Full Name (Last, First, Middle Initial) Trust PAC	Transaction ID: E1450 Date of Disbursement 09 / 15 / 2006
	Mailing Address 228 S Washington Street Suite 115	Amount of Each Disbursement this Period 1000.00
	City Alexandria State VA Zip Code 22314-5408	
	Purpose of Disbursement PAC TO PAC	Category/ Type
	Candidate Name TRUST PAC TEAM REPUBLICANS FOR UTILIZING SENSIBLE TACTICS	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	PAC TO PAC
	State: District:	

B.	Full Name (Last, First, Middle Initial) Debbie Wasserman-Schultz for Congress	Transaction ID: E1445 Date of Disbursement 08 / 08 / 2006
	Mailing Address 4479 Foxglove Lane	Amount of Each Disbursement this Period 1000.00
	City Weston State FL Zip Code 33331-	
	Purpose of Disbursement	Category/ Type
	Candidate Name DEBBIE WASSERMAN SCHULTZ	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: FL District: 20	

C.	Full Name (Last, First, Middle Initial) Congressman Bill Young for Congress Camp	Transaction ID: E1764 Date of Disbursement 09 / 30 / 2006
	Mailing Address PO Box 103	Amount of Each Disbursement this Period -1000.00
	City Alexandria State VA Zip Code 22210-	
	Purpose of Disbursement VOIDED CHK ORG RPT PRE-GEN 2004	Category/ Type
	Candidate Name C. W. YOUNG	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	VOIDED CHK ORG RPT PRE-GEN 2004
	State: FL District: 10	

SUBTOTAL of Disbursements This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	14500.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 / 15	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
International Council of Cruise Lines Political Action Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rochelle Sumner	Nature of Debt (Purpose): Misappropriations of funds
Mailing Address 12303 Sandy Point Court	
City State ZIP Code Silver Spring MD 20904-	

Outstanding Balance Beginning This Period	Transaction ID: LSC2444	
11500.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	11500.00

1) SUBTOTALS This Period This Page (optional).....	11500.00
2) TOTALS This Period (last page this line number only).....	11500.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	11500.00