

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

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

FOR LINE NUMBER: PAGE 6 / 35

(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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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)  
International Council of Cruise Lines PAC

Full Name (Last, First, Middle Initial) <b>A. Richard Ames</b>		Date of Receipt M / D / Y 04 / 08 / 2003
Mailing Address 1082 Deerwood Lane		Transaction ID: 040820039C497
City Weston	State FL	Zip Code 33326-2848
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Carnival Cruise Lines	Occupation Vice President	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Jack Anderson</b>		Date of Receipt M / D / Y 04 / 11 / 2003
Mailing Address 1122 SE 36th St		Transaction ID: 0702200313C506
City Cape Coral	State FL	Zip Code 33904-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Carnival Corporation	Occupation Vice President, Marketing	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Micky Arson</b>		Date of Receipt M / D / Y 04 / 23 / 2003
Mailing Address 999 Collins Ave		Transaction ID: 0702200313C531
City Bal Harbour	State FL	Zip Code 33134-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer Carnival Corporation	Occupation Chairman & CEO	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>6000.00</b>
TOTAL This Period (last page this line number only) .....	