

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

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

FOR LINE NUMBER: PAGE 12 / 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. Thomas Dow</b>		Date of Receipt M / D / Y 06 / 23 / 2003
Mailing Address 100B 5th Ave W		Transaction ID: 0702200313C593
City Seattle	State WA	Zip Code 98119-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer Princess Cruises	Occupation Vice President Public Affairs	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Petar Finken</b>		Date of Receipt M / D / Y 06 / 12 / 2003
Mailing Address 1359 Geranium Place		Transaction ID: 0702200313C577
City West Palm Beach	State FL	Zip Code 33414-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Carnival Corporation	Occupation Dir Maritime Services	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Howard Frank</b>		Date of Receipt M / D / Y 04 / 23 / 2003
Mailing Address 445 Grand Bay Drive		Transaction ID: 0702200313C530
City Key Biscayne	State FL	Zip Code 33149-
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 Vice Chairman & COO	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>10300.00</b>
TOTAL This Period (last page this line number only) .....	