

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Cruise Lines International Association PAC (CLIA PAC)

ADDRESS (number and street) 2111 Wilson Boulevard
8th Floor
Arlington VA 22201

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00432393

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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
 - Mar 20 (M3)
 - Apr 20 (M4)
 - May 20 (M5)
 - Jun 20 (M6)
 - Jul 20 (M7)
 - Aug 20 (M8)
 - Sep 20 (M9)
 - Oct 20 (M10)
 - Nov 20 (M11) (Non-Election Year Only)
 - Dec 20 (M12) (Non-Election Year Only)
 - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
 - General (12G)
 - Runoff (12R)
 - Convention (12C)
 - Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- General (30G)
 - Runoff (30R)
 - Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 03 / 01 / 2015 through [MM] / [DD] / [YYYY] 03 / 31 / 2015

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 Michael McGarry

Signature of Treasurer Michael McGarry [Electronically Filed] Date 04 / 20 / 2015

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									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Cruise Lines International Association PAC (CLIA PAC)

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		48246.09
(b) Cash on Hand at Beginning of Reporting Period.....	45746.09	
(c) Total Receipts (from Line 19)	39977.00	54477.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	85723.09	102723.09
7. Total Disbursements (from Line 31).....	30000.00	47000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	55723.09	55723.09
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Cruise Lines International Association PAC (CLIA PAC)

Report Covering the Period: From: / / To: / /

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		
(i) Itemized (use Schedule A).....	29027.00	43527.00
(ii) Unitemized	5950.00	5950.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	34977.00	49477.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	39977.00	54477.00
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 Transfers (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))..... ▶	39977.00	54477.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	39977.00	54477.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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.....	30000.00	47000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated 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)) ..	30000.00	47000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30000.00	47000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	39977.00	54477.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	39977.00	54477.00
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: (check only one)	PAGE 6 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
Cruise Lines International Association PAC (CLIA PAC)

A. Jo-Ann Arndt
Full Name (Last, First, Middle Initial)
Mailing Address 5212 Overview Ct
City Orlando State FL Zip Code 32819-3853
FEC ID number of contributing federal political committee. **C**
Name of Employer Disney Cruise Line Occupation Vice President Shoreside Travel Operat
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 16 / 2015
Transaction ID : A8FF10B143A634B50B1A
Amount of Each Receipt this Period 300.00
Political Contribution

B. Michael Bayley
Full Name (Last, First, Middle Initial)
Mailing Address 5851 N. Bayshore Dr
City Miami State FL Zip Code 33137-2333
FEC ID number of contributing federal political committee. **C**
Name of Employer Royal Caribbean International Occupation President & CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 03 / 16 / 2015
Transaction ID : A0A2B2291A7294EE298B
Amount of Each Receipt this Period 3000.00
Political Contribution

C. David Bernstein
Full Name (Last, First, Middle Initial)
Mailing Address 12000 SW 90th Ave
City Miami State FL Zip Code 33176-5105
FEC ID number of contributing federal political committee. **C**
Name of Employer Carnival Corporation Occupation CFO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 16 / 2015
Transaction ID : A7CEBBD1F6D5A4057B61
Amount of Each Receipt this Period 1000.00
Political Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 4300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC (CLIA PAC)

Full Name (Last, First, Middle Initial) A. James R. Border		Date of Receipt
Mailing Address 17828 NW 15th St		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2015"/>
City	State	Zip Code
Pembroke Pines	FL	33029-3134
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Carnival Corporation	Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	
		Transaction ID : AD15DC8221C33489A9F9
		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
		Political Contribution

Full Name (Last, First, Middle Initial) B. Brian Brennan		Date of Receipt
Mailing Address 1600 Victoria Pointe Cir		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2015"/>
City	State	Zip Code
Weston	FL	33327-1301
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Carnival Corporation	Senior Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	
		Transaction ID : AA3930FE93E8C4E808C2
		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
		Political Contribution

Full Name (Last, First, Middle Initial) C. Alan B Buckelew		Date of Receipt
Mailing Address 3212 Colby Ave		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code
Los Angeles	CA	90066-1324
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Carnival Corporation	COO	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	
		Transaction ID : A1528FA5BE29744868F4
		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
		Political Contribution

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1750.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC (CLIA PAC)

A. William Burke
Full Name (Last, First, Middle Initial)

Mailing Address 6301 Collins Ave #1903

City	State	Zip Code
Miami Beach	FL	33141-4644

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

Name of Employer	Occupation
Carnival Corporation	Chief Maritime Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2015

Transaction ID : A2A07903D0B2846EF92

Amount of Each Receipt this Period
1500.00

Political Contribution

B. Stefan Christoffersson
Full Name (Last, First, Middle Initial)

Mailing Address 729 Crystal Ct

City	State	Zip Code
Weston	FL	33326-2914

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

Name of Employer	Occupation
Carnival Cruise Lines	VP Housekeeping, Laundry

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2015

Transaction ID : A3832F8C8F0BF4C7AA28

Amount of Each Receipt this Period
500.00

Political Contribution

C. David Drier
Full Name (Last, First, Middle Initial)

Mailing Address 3 Layton Ter.

City	State	Zip Code
Saint Louis	MO	63124-1893

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

Name of Employer	Occupation
Carnival Corp.	VP Social Innovation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2015

Transaction ID : A5CC0314BBD7B4F4C8E5

Amount of Each Receipt this Period
500.00

Political Contribution

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 23
<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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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC (CLIA PAC)

Full Name (Last, First, Middle Initial) A. Mr. Christine Duffy		Date of Receipt
Mailing Address 2244 Deer Path RD		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2015"/>
City	State	Zip Code
Huntingdon Valley	PA	19006-5906
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : AA5D51B9F6E1B48D3AAC
Cruise Lines International Association	President	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2000.00"/>	<input type="text" value="2000.00"/>
		Political Contribution

Full Name (Last, First, Middle Initial) B. Dominick Froio Jr.		Date of Receipt
Mailing Address 1510 Seabay Rd		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code
Weston	FL	33326-3330
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : A6AB17C6B36AE4709937
Carnival Cruise Lines	Vice President Security Services	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	<input type="text" value="500.00"/>
		Political Contribution

Full Name (Last, First, Middle Initial) C. Patrick Gerrity		Date of Receipt
Mailing Address 8519 Redleaf Ln		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2015"/>
City	State	Zip Code
Orlando	FL	32819-3927
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : A2306CB4A2405444B8B4
Disney Cruise Line	VP Safty, Security and Environmental P	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="210.00"/>	<input type="text" value="210.00"/>
		Political Contribution

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="2710.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 23
<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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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC (CLIA PAC)

A. Martin Goldman
Full Name (Last, First, Middle Initial)
Mailing Address 6636 SW 69th Ave
City Miami State FL Zip Code 33143-3148
FEC ID number of contributing federal political committee. **C**
Name of Employer Carnival Corporation Occupation Senior Vice President
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 03 / 27 / 2015
Transaction ID : A3CB2C07DF6CB4D468AC
Amount of Each Receipt this Period 500.00
Political Contribution

B. Gabriela Gonzalez
Full Name (Last, First, Middle Initial)
Mailing Address 1577 Bay Rd Apt 208
City Miami Beach State FL Zip Code 33139-2280
FEC ID number of contributing federal political committee. **C**
Name of Employer Carnival Cruise Line Occupation VP, Photo and Guest Technology
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 03 / 31 / 2015
Transaction ID : A96DB730DFAF2467BA22
Amount of Each Receipt this Period 500.00
Political Contribution

C. John Haeflinger
Full Name (Last, First, Middle Initial)
Mailing Address 3353 W Stonebrook Cir
City Davie State FL Zip Code 33330-1274
FEC ID number of contributing federal political committee. **C**
Name of Employer Carnival Corporation Occupation Vice President
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 03 / 27 / 2015
Transaction ID : A9A60F44A1BC7488F975
Amount of Each Receipt this Period 500.00
Political Contribution

SUBTOTAL of Receipts This Page (optional).....▶ 1500.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC (CLIA PAC)

A. Laura C. Hall
 Full Name (Last, First, Middle Initial)
 Mailing Address 4165 Poinciana Ave
 City Miami State FL Zip Code 33133-6330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Disney Cruise Line Occupation CIO
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : AF1AD9D829F954EC789F
 Amount of Each Receipt this Period
 500.00
 Political Contribution

B. John Harshaw
 Full Name (Last, First, Middle Initial)
 Mailing Address 10623 SW 26th Ct
 City Davie State FL Zip Code 33328-1018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Carnival Cruise Lines Occupation Director IS Operations
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : A29EAE88067CC43FCB1C
 Amount of Each Receipt this Period
 500.00
 Political Contribution

C. Stephen Hodes
 Full Name (Last, First, Middle Initial)
 Mailing Address 3530 Magellan Cir Apt 615
 City Miami State FL Zip Code 33180-3751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Carnival Corporation Occupation Director
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : A4BB7C2BEC2B34726BF0
 Amount of Each Receipt this Period
 216.00
 Political Contribution

SUBTOTAL of Receipts This Page (optional).....	1216.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC (CLIA PAC)

A. Karl Holz
Full Name (Last, First, Middle Initial)
Mailing Address 6139 S Hampshire Ct
City Windermere State FL Zip Code 34786-5623
FEC ID number of contributing federal political committee. **C**
Name of Employer The Walt Disney Company Occupation President DCL
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **2000.00**

Date of Receipt **03 / 16 / 2015**
Transaction ID : A4EFFC13D63574896BCD
Amount of Each Receipt this Period **2000.00**
Political Contribution

B. Paul S. Jarvis
Full Name (Last, First, Middle Initial)
Mailing Address 276 Landings Blvd
City Weston State FL Zip Code 33327-1116
FEC ID number of contributing federal political committee. **C**
Name of Employer Carnival Corporation Occupation Vice President of Casino Operations
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 27 / 2015**
Transaction ID : AA468D183E4FB4607ADC
Amount of Each Receipt this Period **500.00**
Political Contribution

C. Michael H. Kaczmarek
Full Name (Last, First, Middle Initial)
Mailing Address 1410 Lacosta Dr W
City Pembroke Pines State FL Zip Code 33027-2305
FEC ID number of contributing federal political committee. **C**
Name of Employer Carnival Corporation Occupation Vice President Shipbuilding
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 27 / 2015**
Transaction ID : A448271367B32447DAFC
Amount of Each Receipt this Period **500.00**
Political Contribution

SUBTOTAL of Receipts This Page (optional)..... **3000.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC (CLIA PAC)

A. Rena Langley
Full Name (Last, First, Middle Initial)

Mailing Address 2009 Westover Reserve Blvd

City Windermere State FL Zip Code 34786-6211

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

Name of Employer Disney Cruise Line Occupation VP Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015

Transaction ID : AA46A9ED9625E44E89EB

Amount of Each Receipt this Period
 250.00

Political Contribution

B. Jason Liberty
Full Name (Last, First, Middle Initial)

Mailing Address 2458 Provence Ct

City Weston State FL Zip Code 33327-1304

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

Name of Employer Royal Caribbean Occupation CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3001.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015

Transaction ID : A3EDFF749B3B94B0D991

Amount of Each Receipt this Period
 3001.00

Political Contribution

C. Lisa Lutloff-Perlo
Full Name (Last, First, Middle Initial)

Mailing Address 921 Coco Plum Way

City Plantation State FL Zip Code 33324-3705

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

Name of Employer Royal Caribbean Cruises Occupation Executive Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015

Transaction ID : A59CD00FB22477DA78

Amount of Each Receipt this Period
 3000.00

Political Contribution

SUBTOTAL of Receipts This Page (optional).....▶	6251.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC (CLIA PAC)

Full Name (Last, First, Middle Initial) A. Vicky Rey		Date of Receipt
Mailing Address 6771 Parkinsonia Dr		M M M / D D D / Y Y Y Y Y Y 03 / 27 / 2015
City	State	Zip Code
Miami Lakes	FL	33014-2649
FEC ID number of contributing federal political committee.	Transaction ID : AEAF6B9A9DCAB435A9E1	
	Amount of Each Receipt this Period	
	500.00	
Name of Employer	Occupation	Political Contribution
Carnival Corporation	VP Guest Services	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	500.00	

Full Name (Last, First, Middle Initial) B. Mary C. Sloan		Date of Receipt
Mailing Address 4172 S Douglas Rd		M M M / D D D / Y Y Y Y Y Y 03 / 27 / 2015
City	State	Zip Code
Miami	FL	33133-6852
FEC ID number of contributing federal political committee.	Transaction ID : A3BD54D1E53A8412A8F1	
	Amount of Each Receipt this Period	
	500.00	
Name of Employer	Occupation	Political Contribution
Carnival Corporation	VP, Risk Management	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	500.00	

Full Name (Last, First, Middle Initial) C. James Stockton		Date of Receipt
Mailing Address 165 W Fawsett Rd		M M M / D D D / Y Y Y Y Y Y 03 / 16 / 2015
City	State	Zip Code
Winter Park	FL	32789-6015
FEC ID number of contributing federal political committee.	Transaction ID : A30B22538FA154691B5C	
	Amount of Each Receipt this Period	
	250.00	
Name of Employer	Occupation	Political Contribution
Disney Cruise Line	Assistant Chief Counsel	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	250.00	

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC (CLIA PAC)

A. Terry L. Thornton
 Full Name (Last, First, Middle Initial)
 Mailing Address 6901 SW 136th St
 City Miami State FL Zip Code 33156-6970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Carnival Cruise Lines Occupation Senior Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 27 / 2015**
Transaction ID : A527C2D92CDD84383AF0
 Amount of Each Receipt this Period **1000.00**
 Political Contribution

B. Lynn Torrent
 Full Name (Last, First, Middle Initial)
 Mailing Address 2100 N Ocean Blvd Apt 1102
 City Fort Lauderdale State FL Zip Code 33305-1942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Carnival Cruise Lines Occupation EVP Sales & Guest Srvc
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 27 / 2015**
Transaction ID : AD0FD2E2B49C54D47ABF
 Amount of Each Receipt this Period **1000.00**
 Political Contribution

C. Jim Urry
 Full Name (Last, First, Middle Initial)
 Mailing Address 1230 Wright Cir Apt 310
 City Kissimmee State FL Zip Code 34747-4077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Disney Cruise Line Occupation VP Entertainment
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 16 / 2015**
Transaction ID : AC73B37474A604028A27
 Amount of Each Receipt this Period **250.00**
 Political Contribution

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC (CLIA PAC)

A. Bert Van Middendorp
 Full Name (Last, First, Middle Initial)
 Mailing Address 2925 Catalina St
 City Miami State FL Zip Code 33133-3718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Azamara Club Cruises Occupation AVP Hotel Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 16 / 2015**
Transaction ID : AD1E85B951C584BB4AA1
 Amount of Each Receipt this Period **1000.00**
 Political Contribution

B. Dwayne Warner
 Full Name (Last, First, Middle Initial)
 Mailing Address 3906 SW 190th Ave
 City Miramar State FL Zip Code 33029-2726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Carnival Cruise Lines Occupation VP Information Systems
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 27 / 2015**
Transaction ID : AD9E28947D85F467A9E2
 Amount of Each Receipt this Period **500.00**
 Political Contribution

C. Carolyn Webster
 Full Name (Last, First, Middle Initial)
 Mailing Address 9850 Quail Cove Ct
 City Windermere State FL Zip Code 34786-8012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Disney Cruise Line Occupation Director Risk Management & Medical Ser
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 16 / 2015**
Transaction ID : A0099E713196446328FD
 Amount of Each Receipt this Period **300.00**
 Political Contribution

SUBTOTAL of Receipts This Page (optional).....	1800.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 23
(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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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC (CLIA PAC)

Full Name (Last, First, Middle Initial)
A. Giovanni Zanotti

Mailing Address 3655 NW 87th Ave

City Doral State FL Zip Code 33178-2418

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

Name of Employer Carnival Corporation Occupation VP, Strategic Sourcing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 16 / 2015

Transaction ID : A3E1181881DB44CD187B

Amount of Each Receipt this Period
500.00

Political Contribution

Full Name (Last, First, Middle Initial)
B.

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	29027.00

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

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

FOR LINE NUMBER: PAGE 18 OF 23
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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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NAME OF COMMITTEE (In Full)
Cruise Lines International Association PAC (CLIA PAC)

A. NCL AMERICA LLC POLITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial)
Mailing Address 7665 CORPORATE CENTER DRIVE
City MIAMI State FL Zip Code 33126
FEC ID number of contributing federal political committee. **C** C00388611
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 16 / 2015
Transaction ID : A4734820C3F734071859
Amount of Each Receipt this Period
5000.00
Political Contribution

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

**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)

Cruise Lines International Association PAC (CLIA PAC)

Full Name (Last, First, Middle Initial)

A. BRADY FOR CONGRESS

Mailing Address PO BOX 8277

City THE WOODLANDS State TX Zip Code 77387

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Kevin Brady

Office Sought: House
 Senate
 President
State: TX District: 08

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	5

Transaction ID : B6DA4504451454A438BA

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. CHARLES BOUSTANY JR. MD FOR CONGRESS, INC.

Mailing Address PO BOX 80126

City LAFAYETTE State LA Zip Code 70598

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Charles W Boustany JR

Office Sought: House
 Senate
 President
State: LA District: 07

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	5

Transaction ID : B0D311AF5D091485FACE

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Defazio for Congress

Mailing Address PO Box 1316

City Springfield State OR Zip Code 97477

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Peter A. DeFazio

Office Sought: House
 Senate
 President
State: OR District: 04

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	5

Transaction ID : B18F8AA0FBA844E5BBA6

Amount of Each Disbursement this Period

2	0	0	0	.	0	0
---	---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

7	0	0	0	.	0	0
---	---	---	---	---	---	---

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

7	0	0	0	.	0	0
---	---	---	---	---	---	---

**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)
Cruise Lines International Association PAC (CLIA PAC)

Full Name (Last, First, Middle Initial)

A. Democratic Congressional Campaign Comm

Mailing Address 430 South Capitol St., SE
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) Other2015

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 26 / 2015

Transaction ID : **BD4E16A53748D4326B88**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. DEVIN NUNES CAMPAIGN COMMITTEE

Mailing Address PO BOX 6545

City VISALIA State CA Zip Code 93290

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Devin G Nunes

Office Sought: House Senate President
State: CA District: 21

Disbursement For: 2016
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 26 / 2015

Transaction ID : **B32495992DCE0459CBD5**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. DUNCAN D. HUNTER FOR CONGRESS

Mailing Address 9340 FUERTE DRIVE SUITE 302

City LA MESA State CA Zip Code 91941

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Duncan D Hunter

Office Sought: House Senate President
State: CA District: 52

Disbursement For: 2016
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 26 / 2015

Transaction ID : **B2D997A0161234D3B85E**

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

10000.00

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)

Cruise Lines International Association PAC (CLIA PAC)

Full Name (Last, First, Middle Initial)

A. FREDERICA S. WILSON FOR CONGRESS

Mailing Address 19821 NW 2ND AVENUE
BOX 354

City MIAMI GARDENS State FL Zip Code 33169

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Frederica S Wilson

Office Sought: House
 Senate
 President
State: FL District: 17

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	5

Transaction ID : B6BB1BC48F98B471DA7D

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Friends of Corrine Brown

Mailing Address 3563 Carriage Walk Lane

City Laurel State MD Zip Code 20724-2052

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Corrine Brown

Office Sought: House
 Senate
 President
State: FL District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	5

Transaction ID : BA86735E297724FDD8D1

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Friends of John Thune

Mailing Address PO BOX 841

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement
Political Contribution

Candidate Name

Sen. John R Thune

Office Sought: House
 Senate
 President
State: SD District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	5

Transaction ID : BA28222F5233647E08FC

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
---	---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

5	5	0	0	.	0	0
---	---	---	---	---	---	---

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

5	5	0	0	.	0	0
---	---	---	---	---	---	---

**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)
Cruise Lines International Association PAC (CLIA PAC)

Full Name (Last, First, Middle Initial)

A. Friends of John Thune

Mailing Address PO BOX 841

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement
Political Contribution

Candidate Name

Sen. John R Thune

Office Sought: House Senate President

Disbursement For: 2016
 Primary General Other (specify) ▼

State: SD District:

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2015

Transaction ID : B3028EE1718044513A73

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mario Diaz-Balart for Congress

Mailing Address 801 Ponce de Leon Blvd.
Suite 1000

City Coral Gables State FL Zip Code 33134

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Mario Diaz-Balart

Office Sought: House Senate President

Disbursement For: 2016
 Primary General Other (specify) ▼

State: FL District: 21

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2015

Transaction ID : B70036D4E88954F81A5C

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. PORTMAN FOR SENATE COMMITTEE

Mailing Address 9856 ARCHER LANE

City Dublin State OH Zip Code 43017-8914

Purpose of Disbursement
Political Contribution

Candidate Name

Sen. Rob Portman

Office Sought: House Senate President

Disbursement For: 2016
 Primary General Other (specify) ▼

State: OH District:

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2015

Transaction ID : B1DDF85BE0F5E45999AD

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

5500.00

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)

Cruise Lines International Association PAC (CLIA PAC)

Full Name (Last, First, Middle Initial)

A. SULLIVAN FOR US SENATE

Mailing Address 3705 ARCTIC BLVD #447

City ANCHORAGE State AK Zip Code 99503

Purpose of Disbursement
Political Contribution

Candidate Name

Dan Sullivan

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: AK District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2015

Transaction ID : BDBCED1AAB0E641F2AC7

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

2000.00

30000.00
