

**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)**

Full Name (Last, First, Middle Initial) <b>A. Martin Goldman</b>		Date of Receipt MM / DD / YYYY 03 / 27 / 2015 <b>Transaction ID : A3CB2C07DF6CB4D468AC</b>
Mailing Address 6636 SW 69th Ave		Amount of Each Receipt this Period 500.00 Political Contribution
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Gabriela Gonzalez</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2015 <b>Transaction ID : A96DB730DFAF2467BA22</b>
Mailing Address 1577 Bay Rd Apt 208		Amount of Each Receipt this Period 500.00 Political Contribution
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. John Haeflinger</b>		Date of Receipt MM / DD / YYYY 03 / 27 / 2015 <b>Transaction ID : A9A60F44A1BC7488F975</b>
Mailing Address 3353 W Stonebrook Cir		Amount of Each Receipt this Period 500.00 Political Contribution
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

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