

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
Cruise Lines International Association

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

2. **FEC IDENTIFICATION NUMBER** 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 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 2007 through 12 31 2007

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 01 24 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**

Write or Type Committee Name
 Crusie Lines International Association

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7	<table border="1" style="width: 100%; height: 20px;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">0.00</td></tr></table>	0.00
Y	Y	Y	Y									
2	0	0	7									
0.00												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">27705.00</td></tr></table>	27705.00										
27705.00												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">39800.00</td></tr></table>	39800.00	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">111070.00</td></tr></table>	111070.00								
39800.00												
111070.00												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">67505.00</td></tr></table>	67505.00	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">111070.00</td></tr></table>	111070.00								
67505.00												
111070.00												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">56775.00</td></tr></table>	56775.00	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">100340.00</td></tr></table>	100340.00								
56775.00												
100340.00												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">10730.00</td></tr></table>	10730.00	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">10730.00</td></tr></table>	10730.00								
10730.00												
10730.00												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">0.00</td></tr></table>	0.00										
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
 Crusie Lines International Association

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	38790.00	97112.00
(i) Itemized (use Schedule A)	1010.00	8958.00
(ii) Unitemized	39800.00	106070.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	39800.00	106070.00
12. Transfers From Affiliated/Other Party Committees	0.00	5000.00
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))	39800.00	111070.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	39800.00	111070.00

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	65.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	65.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	56775.00	100275.00
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))..	56775.00	100340.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	56775.00	100340.00

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)	39800.00	106070.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	39800.00	106070.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	65.00
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	65.00

**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 / 25
	<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)
 Crusie Lines International Association

A.	Full Name (Last, First, Middle Initial) Peter Compton	Date of Receipt MM / DD / YYYY 08 / 17 / 2007
	Mailing Address 17225 SW 78th Ct	Transaction ID: 71024.C3211
	City State Zip Code Palmetto Bay FL 33157	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Royal Caribbean Cruises Vice President Entertainment	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

B.	Full Name (Last, First, Middle Initial) Colleen Fain	Date of Receipt MM / DD / YYYY 11 / 15 / 2007
	Mailing Address 700 Arvida Parkway	Transaction ID: 80115.C3238
	City State Zip Code Coral Gables FL 33156	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Information Requested Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) Richard D. Fain	Date of Receipt MM / DD / YYYY 11 / 15 / 2007
	Mailing Address 700 Arvida Parkway	Transaction ID: 80107.C3235
	City State Zip Code Coral Gables FL 33156	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Royal Caribbean Cruises Chairman & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	12500.00
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 / 25
	<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)
 Crusie Lines International Association

A.	Full Name (Last, First, Middle Initial) Adam Goldstein	Date of Receipt MM / DD / YYYY 12 / 07 / 2007
	Mailing Address 4321 Santa Maria St.	Transaction ID: 80107.C3230
	City State Zip Code Coral Gables FL 33146	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Royal Caribbean Cruises EVP, Brand Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Daniel Hanrahan	Date of Receipt MM / DD / YYYY 08 / 28 / 2007
	Mailing Address 808 Brickell Key Dr Unit 3806	Transaction ID: 71024.C3212
	City State Zip Code Miami FL 33131	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Celebrity Cruises President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

C.	Full Name (Last, First, Middle Initial) Rolf Hensche	Date of Receipt MM / DD / YYYY 07 / 18 / 2007
	Mailing Address 507 Sevilla Ave	Transaction ID: 71024.C3218
	City State Zip Code Coral Gables FL 33134-5714	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Carnival Corporation Director F+ B Sourcing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	7800.00
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 8 / 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Crusie Lines International Association

<p>A. Full Name (Last, First, Middle Initial) Eleni Kalisch</p> <p>Mailing Address 1111 Brickell Bay Drive #1503</p> <p>City State Zip Code Miami FL 33131</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Royal Caribbean Cruises VP - Congressional Affairs</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 18 / 2007</p> <p>Transaction ID: 71024.C3216</p> <p>Amount of Each Receipt this Period 2500.00</p> <p>Receipt</p>
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<p>B. Full Name (Last, First, Middle Initial) John (Joannis) Krousonloudis</p> <p>Mailing Address 2654 Edgewater Drive</p> <p>City State Zip Code Weston FL 33332</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Celebrity Cruises Senior Vice President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 350.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2007</p> <p>Transaction ID: 71024.C3205</p> <p>Amount of Each Receipt this Period 350.00</p> <p>Receipt</p>
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<p>C. Full Name (Last, First, Middle Initial) William Martin</p> <p>Mailing Address 1251 Quail Avenue</p> <p>City State Zip Code Miami FL 33166</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Royal Caribbean Cruises VP Trade Support & Srvc</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2007</p> <p>Transaction ID: 71024.C3202</p> <p>Amount of Each Receipt this Period 300.00</p> <p>Receipt</p>
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SUBTOTAL of Receipts This Page (optional)	3150.00
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 / 25
	<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)
Crusie Lines International Association

A.	Full Name (Last, First, Middle Initial) Curtis McIntyre	Date of Receipt MM / DD / YYYY 08 / 06 / 2007
	Mailing Address 2627 S. Bayshore Drive	Transaction ID: 71024.C3206
	City State Zip Code Miami FL 33133	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Royal Caribbean Cruises Vice President Continuing Imp	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Margot Pritzker	Date of Receipt MM / DD / YYYY 12 / 07 / 2007
	Mailing Address 2430 N. Lakeview	Transaction ID: 80107.C3231
	City State Zip Code Chicago IL 60614	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Homemaker Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) Thomas Pritzker	Date of Receipt MM / DD / YYYY 12 / 21 / 2007
	Mailing Address 71 S Wacker Dr Ste 4700 Suite 4700	Transaction ID: 80107.C3233
	City State Zip Code Chicago IL 60606-4637	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Hyatt Corporation Chairman & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	11000.00
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 10 / 25
(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)
Crusie Lines International Association

A.

Full Name (Last, First, Middle Initial)
Guillermo Rammos

Mailing Address 400 East Dilido Dr.

City State Zip Code
Miami Beach FL 33139

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

Name of Employer: Celebrity Cruises
Occupation: Associate Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 07 / 18 / 2007
Transaction ID: 71024.C3215
Amount of Each Receipt this Period: 500.00
Receipt

B.

Full Name (Last, First, Middle Initial)
Brian Rice

Mailing Address 2721 Center Court Drive

City State Zip Code
Weston FL 33332

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

Name of Employer: Royal Caribbean Cruises
Occupation: EUP & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 08 / 06 / 2007
Transaction ID: 71024.C3204
Amount of Each Receipt this Period: 2500.00
Receipt

C.

Full Name (Last, First, Middle Initial)
Barbara Shrut

Mailing Address 436 Bargello Avenue

City State Zip Code
Coral Gables FL 33146

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

Name of Employer: Royal Caribbean Cruises
Occupation: VP Finance + Admin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 07 / 18 / 2007
Transaction ID: 71024.C3217
Amount of Each Receipt this Period: 500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 3500.00

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 11 / 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
 Crusie Lines International Association

A. Full Name (Last, First, Middle Initial)
 Dag Toemmerviu
 Mailing Address 22600 Bella Rita Circle
 City State Zip Code
 Boca Raton FL 33433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Seabourn Cruise Line Director Port Operations
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 340.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 18 / 2007
Transaction ID: 71024.C3222
 Amount of Each Receipt this Period
 340.00
 Receipt

B. Full Name (Last, First, Middle Initial)
 Lynn White
 Mailing Address 6100 SW 121 Street
 City State Zip Code
 Pinecrest FL 33156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Royal Caribbean Cruises VP Tax & Risk Management
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 17 / 2007
Transaction ID: 71024.C3210
 Amount of Each Receipt this Period
 500.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► **840.00**

TOTAL This Period (last page this line number only) ► **38790.00**

**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)

PAGE 12 / 25

<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)
Crusie Lines International Association

A.	Full Name (Last, First, Middle Initial) Markey for Congress	Transaction ID: 80107.E1710 Date of Disbursement 12 / 21 / 2007
	Mailing Address 209 Pennsylvania Avenue, SE	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20003-	
	Purpose of Disbursement CO-04 US HOUSE	Category/ Type
	Candidate Name ELIZABETH HELEN MARKEY	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CO-04 US HOUSE

B.	Full Name (Last, First, Middle Initial) Friends of Jay Rockefeller	Transaction ID: 71024.E1589 Date of Disbursement 08 / 01 / 2007
	Mailing Address PO Box 1909	Amount of Each Disbursement this Period 1000.00
	City Charleston State WV Zip Code 25327-	
	Purpose of Disbursement WV US SENATE	Category/ Type
	Candidate Name JOHN DAVISON ROCKEFELLER	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		WV US SENATE

C.	Full Name (Last, First, Middle Initial) Friends of Jay Rockefeller	Transaction ID: 71024.E1618 Date of Disbursement 10 / 21 / 2007
	Mailing Address PO Box 1909	Amount of Each Disbursement this Period 1000.00
	City Charleston State WV Zip Code 25327-	
	Purpose of Disbursement WV US SENATE	Category/ Type
	Candidate Name JOHN DAVISON ROCKEFELLER	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		WV US SENATE

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)

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<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)
Crusie Lines International Association

A. Full Name (Last, First, Middle Initial) DWS PAC (Democrats Win Seats)	Mailing Address 1071 TWIN BRANCH LN	Transaction ID: 71024.E1616 Date of Disbursement 08 / 01 / 2007
	City: Weston State: FL Zip Code: 33326- Purpose of Disbursement: PAC TO PAC Candidate Name:	Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) DWS PAC (Democrats Win Seats)	Mailing Address 1071 TWIN BRANCH LN	Transaction ID: 71024.E1693 Date of Disbursement 10 / 05 / 2007
	City: Weston State: FL Zip Code: 33326- Purpose of Disbursement: PAC TO PAC Candidate Name:	Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) NRSC	Mailing Address 425 SECOND STREET NE	Transaction ID: 80116.E1723 Date of Disbursement 11 / 14 / 2007
	City: Washington State: DC Zip Code: 20002- Purpose of Disbursement: PAC TO PPC Candidate Name:	Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

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<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

<p>A. Full Name (Last, First, Middle Initial) Becerra for Congress</p> <p>Mailing Address P.O. Box 261060</p> <p>City Los Angeles State CA Zip Code 90026-</p> <p>Purpose of Disbursement CA-31 US HOUSE</p> <p>Candidate Name XAVIER BECERRA</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District: 31</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80116.E1719</p> <p>Date of Disbursement 12 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>CA-31 US HOUSE</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Barbara Boxer</p> <p>Mailing Address PO BOX 641751</p> <p>City Los Angeles State CA Zip Code 90064-</p> <p>Purpose of Disbursement CA US SENATE</p> <p>Candidate Name BARBARA BOXER</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA 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: 71024.E1625</p> <p>Date of Disbursement 09 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>CA US SENATE</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Barbara Boxer</p> <p>Mailing Address PO BOX 641751</p> <p>City Los Angeles State CA Zip Code 90064-</p> <p>Purpose of Disbursement CA US SENATE</p> <p>Candidate Name BARBARA BOXER</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA 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: 71024.E1588</p> <p>Date of Disbursement 08 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>CA US SENATE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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)
Crusie Lines International Association

A.	Full Name (Last, First, Middle Initial) Harvest PAC	Transaction ID: 71024.E1591 Date of Disbursement 08 / 01 / 2007
	Mailing Address 236 MASSACHUSETTS AVENUE NE #508	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20002-	
	Purpose of Disbursement PAC TO PAC	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
	State: District:	Other
		PAC TO PAC

B.	Full Name (Last, First, Middle Initial) Hillary Clinton for President	Transaction ID: 80116.E1722 Date of Disbursement 12 / 05 / 2007
	Mailing Address PO Box 101436	Amount of Each Disbursement this Period 5000.00
	City Arlington State VA Zip Code 22210-	
	Purpose of Disbursement US PRESIDENTIAL	Category/Type
	Candidate Name HILLARY RODHAM CLINTON	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District: 00	
		US PRESIDENTIAL

C.	Full Name (Last, First, Middle Initial) Coble for Congress	Transaction ID: 80116.E1720 Date of Disbursement 12 / 21 / 2007
	Mailing Address P.O. Box 1177	Amount of Each Disbursement this Period 1000.00
	City Greensboro State NC Zip Code 27402-	
	Purpose of Disbursement NC-06 US HOUSE	Category/Type
	Candidate Name JOHN HOWARD COBLE	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NC District: 06	
		NC-06 US HOUSE

SUBTOTAL of Disbursements This Page (optional)	7000.00
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)

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<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

A. Cummings for Congress Campaign Committee

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1631

City Baltimore State MD Zip Code 21203-

Purpose of Disbursement MD-07 US HOUSE

Candidate Name ELIJAH E CUMMINGS

Office Sought: House Senate President

State: MD District: 07

Disbursement For: 2008 Primary General Other (specify) ▼

Transaction ID: 71024.E1592

Date of Disbursement

08 / 01 / 2007

Amount of Each Disbursement this Period

2000.00

MD-07 US HOUSE

B. Tom Davis for Congress

Full Name (Last, First, Middle Initial)

Mailing Address 6429 Downing Court

City Annandale State VA Zip Code 22003-

Purpose of Disbursement VA-11 US HOUSE

Candidate Name THOMAS M DAVIS, III

Office Sought: House Senate President

State: VA District: 11

Disbursement For: 2008 Primary General Other (specify) ▼

Transaction ID: 71024.E1630

Date of Disbursement

10 / 05 / 2007

Amount of Each Disbursement this Period

2000.00

VA-11 US HOUSE

C. Freedom & Democracy Fund

Full Name (Last, First, Middle Initial)

Mailing Address 610 South Boulevard

City Tampa State FL Zip Code 33606-

Purpose of Disbursement PAC TO PAC

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2007 Primary General Other (specify) ▼

Other

Transaction ID: 71024.E1619

Date of Disbursement

09 / 21 / 2007

Amount of Each Disbursement this Period

2000.00

PAC TO PAC

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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)

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<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)
Crusie Lines International Association

<p>A. Full Name (Last, First, Middle Initial) John D Dingell for Congress Committee</p> <p>Mailing Address PO Box 75214</p> <p>City Washington State DC Zip Code 20013-</p> <p>Purpose of Disbursement MI-15 US HOUSE</p> <p>Candidate Name JOHN D DINGELL</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 15</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71024.E1637</p> <p>Date of Disbursement 10 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>MI-15 US HOUSE</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Dick Durbin</p> <p>Mailing Address PO BOX 1949</p> <p>City Springfield State IL Zip Code 62705-</p> <p>Purpose of Disbursement IL US SENATE</p> <p>Candidate Name RICHARD J DURBIN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 00</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71024.E1623</p> <p>Date of Disbursement 09 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>IL US SENATE</p>
<p>C. 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-23 US HOUSE</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71024.E1621</p> <p>Date of Disbursement 09 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>FL-23 US HOUSE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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)
Crusie Lines International Association

<p>A. 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-23 US HOUSE</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71024.E1638 Date of Disbursement 10 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>Category/Type FL-23 US HOUSE</p>
<p>B. Full Name (Last, First, Middle Initial) Hoyer for Congress</p> <p>Mailing Address 7905 Malcom Road, Suite 102</p> <p>City Clinton State MD Zip Code 20735-</p> <p>Purpose of Disbursement MD-05 US HOUSE</p> <p>Candidate Name STENY HAMILTON HOYER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71024.E1639 Date of Disbursement 10 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type MD-05 US HOUSE</p>
<p>C. Full Name (Last, First, Middle Initial) Dan10</p> <p>Mailing Address 1088 BISHOP STREET SUITE 1009</p> <p>City Honolulu State HI Zip Code 96813-</p> <p>Purpose of Disbursement HI US SENATE</p> <p>Candidate Name DANIEL K INOUE</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: HI 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: 71024.E1622 Date of Disbursement 09 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>Category/Type HI US SENATE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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)

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<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)
Crusie Lines International Association

<p>A. Full Name (Last, First, Middle Initial) Eddie Bernice Johnson for Congress</p> <p>Mailing Address 3102 Maple Avenue Suite 605</p> <p>City Dallas State TX Zip Code 75201-</p> <p>Purpose of Disbursement TX-30 US HOUSE</p> <p>Candidate Name EDDIE BERNICE JOHNSON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 30</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80116.E1721 Date of Disbursement: 12 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>TX-30 US HOUSE</p>
<p>B. Full Name (Last, First, Middle Initial) Kagen 4 Congress</p> <p>Mailing Address 100 W. College Ave. 50 D</p> <p>City Appleton State WI Zip Code 54911-</p> <p>Purpose of Disbursement 11/15/07 EVENT; WI-08 US HOUSE</p> <p>Candidate Name STEVEN L KAGEN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80116.E1718 Date of Disbursement: 11 / 14 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>11/15/07 EVENT; WI-08 US HOUSE</p>
<p>C. Full Name (Last, First, Middle Initial) Kagen 4 Congress</p> <p>Mailing Address 100 W. College Ave. 50 D</p> <p>City Appleton State WI Zip Code 54911-</p> <p>Purpose of Disbursement WI-08 US HOUSE</p> <p>Candidate Name STEVEN L KAGEN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80116.E1724 Date of Disbursement: 12 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>WI-08 US HOUSE</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)

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<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)
Crusie Lines International Association

<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 MI-09 US HOUSE</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71024.E1593</p> <p>Date of Disbursement 08 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>MI-09 US HOUSE</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 NJ-02 US HOUSE</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80107.E1709</p> <p>Date of Disbursement 12 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>NJ-02 US HOUSE</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</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71024.E1629</p> <p>Date of Disbursement 10 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>PAC TO PAC</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)

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<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)
Crusie Lines International Association

A.	Full Name (Last, First, Middle Initial) Friends of McCaskill Mailing Address 607 14TH STREET NW SUITE 800 City Washington State DC Zip Code 20005- Purpose of Disbursement 2006 DEBT RETIREMENT Candidate Name CLAIRE MCCASKILL Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71024.E1660 Date of Disbursement 10 / 05 / 2007 Amount of Each Disbursement this Period 1275.00 2006 DEBT RETIREMENT
B.	Full Name (Last, First, Middle Initial) Friends of George Miller Mailing Address P.O. Box 5864 City Concord State CA Zip Code 94524- Purpose of Disbursement CA-07 US HOUSE Candidate Name GEORGE MILLER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 07 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80107.E1711 Date of Disbursement 12 / 21 / 2007 Amount of Each Disbursement this Period 1000.00 CA-07 US HOUSE
C.	Full Name (Last, First, Middle Initial) Friends of Jim Oberstar Mailing Address 1017 8th St NE City Washington State DC Zip Code 20002-3620 Purpose of Disbursement MN-08 US HOUSE Candidate Name JAMES L OBERSTAR Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 08 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71024.E1661 Date of Disbursement 10 / 05 / 2007 Amount of Each Disbursement this Period 1000.00 MN-08 US HOUSE

SUBTOTAL of Disbursements This Page (optional) ▶

3275.00

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)

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<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)
Crusie Lines International Association

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Citizens for Tom Petri</p> <p>Mailing Address PO Box 270</p> <p>City Fond Du Lac State WI Zip Code 54936-</p> <p>Purpose of Disbursement WI-06 US HOUSE</p> <p>Candidate Name TOM PETRI</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 06</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80107.E1712</p> <p>Date of Disbursement 12 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>WI-06 US HOUSE</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Rangel for Congress</p> <p>Mailing Address 2030 ALLEN PLACE NW</p> <p>City Washington State DC Zip Code 20009-</p> <p>Purpose of Disbursement NY-15 US HOUSE</p> <p>Candidate Name CHARLES B RANGEL</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80107.E1713</p> <p>Date of Disbursement 12 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>NY-15 US HOUSE</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Rangel for Congress</p> <p>Mailing Address 2030 ALLEN PLACE NW</p> <p>City Washington State DC Zip Code 20009-</p> <p>Purpose of Disbursement NY-15 US HOUSE</p> <p>Candidate Name CHARLES B RANGEL</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71024.E1611</p> <p>Date of Disbursement 08 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>NY-15 US HOUSE</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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)
Crusie Lines International Association

<p>A. Full Name (Last, First, Middle Initial) Ros-Lehtinen for Congress</p> <p>Mailing Address PO Box 52-2784</p> <p>City Miami State FL Zip Code 33152-</p> <p>Purpose of Disbursement FL-18 US HOUSE</p> <p>Candidate Name ILEANA ROS-LEHTINEN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District: 18</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71024.E1678</p> <p>Date of Disbursement 10 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>FL-18 US HOUSE</p>
<p>B. Full Name (Last, First, Middle Initial) Serrano for Congress</p> <p>Mailing Address PO Box 5577; Manhattanville Statio</p> <p>City New York State NY Zip Code 10027-</p> <p>Purpose of Disbursement NY-16 US HOUSE</p> <p>Candidate Name JOSE E SERRANO</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 16</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80116.E1717</p> <p>Date of Disbursement 12 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>NY-16 US HOUSE</p>
<p>C. Full Name (Last, First, Middle Initial) Serrano for Congress</p> <p>Mailing Address PO Box 5577; Manhattanville Statio</p> <p>City New York State NY Zip Code 10027-</p> <p>Purpose of Disbursement NY-16 US HOUSE</p> <p>Candidate Name JOSE E SERRANO</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 16</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71024.E1615</p> <p>Date of Disbursement 08 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>NY-16 US HOUSE</p>

SUBTOTAL of Disbursements This Page (optional)	4000.00
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)
Crusie Lines International Association

<p>A. 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</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: 71024.E1590 Date of Disbursement 08 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>PA US SENATE</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</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: 71024.E1617 Date of Disbursement 09 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>PA US SENATE</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 FL-06 US HOUSE</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71024.E1692 Date of Disbursement 10 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>FL-06 US HOUSE</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)

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<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)
Crusie Lines International Association

A. Full Name (Last, First, Middle Initial) Friends of Fred Thompson Mailing Address 1130 8TH AVENUE SOUTH City Nashville State TN Zip Code 37203- Purpose of Disbursement CONTRIBUTION TO PRESIDENTIAL CANDID Candidate Name FRED DALTON THOMPSON Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	Transaction ID: 71024.E1620 Date of Disbursement 09 / 21 / 2007
	Amount of Each Disbursement this Period 1000.00 CONTRIBUTION TO PRESIDENTIAL CANDID
B. Full Name (Last, First, Middle Initial) Debbie Wasserman-Schultz for Congress Mailing Address 4479 Foxglove Lane City Weston State FL Zip Code 33331- Purpose of Disbursement FL-20 US HOUSE Candidate Name DEBBIE WASSERMAN SCHULTZ Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 20	Transaction ID: 80107.E1714 Date of Disbursement 12 / 21 / 2007
	Amount of Each Disbursement this Period 1000.00 FL-20 US HOUSE

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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56775.00