

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

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

FOR LINE NUMBER: PAGE 11 OF 15
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial)
A. Carolyn Webster

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 ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2016

Transaction ID : A049D1A0969F74250854

Amount of Each Receipt this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Paul S. Jarvis

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
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2016

Transaction ID : AD98C2395A7694A7C8D2

Amount of Each Receipt this Period
500.00

Memo Item

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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	24050.00