

# 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] 05 / 01 / 2014 through [MM] / [DD] / [YYYY] 05 / 31 / 2014

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 06 / 20 / 2014

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="2014"/>		40721.09
(b) Cash on Hand at Beginning of Reporting Period.....	46471.09	
(c) Total Receipts (from Line 19) .....	28825.00	68575.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	75296.09	109296.09
7. Total Disbursements (from Line 31).....	1500.00	35500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	73796.09	73796.09
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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).....	27100.00	57600.00
(ii) Unitemized .....	1725.00	5975.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	28825.00	63575.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	28825.00	68575.00
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))..... ▶	28825.00	68575.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	28825.00	68575.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	1500.00	35500.00
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)) ..	1500.00	35500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1500.00	35500.00

**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) .....	28825.00	68575.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	28825.00	68575.00
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 7 OF 11
	<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)**

Full Name (Last, First, Middle Initial) <b>A. Douglas F. Eney</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 30 / 2014
Mailing Address 317 Palm St		<b>Transaction ID : A2C7E2E83C4A44EC9964</b>
City Hollywood	State FL	Zip Code 33019-4505
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 600.00	
Name of Employer Carnival Cruise Lines	Occupation Vice President IS Engineering	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B. Colleen Fain</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 30 / 2014
Mailing Address 700 Arvida Pkwy		<b>Transaction ID : A6444D58E269541719D1</b>
City Miami	State FL	Zip Code 33156-2325
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00	
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Richard D. Fain</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 30 / 2014
Mailing Address 700 Arvida Pkwy		<b>Transaction ID : A3C7F1AD9919F4FD298D</b>
City Miami	State FL	Zip Code 33156-2325
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00	
Name of Employer Royal Caribbean Cruises	Occupation Chairman & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10600.00
<b>TOTAL</b> 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 8 OF 11
	<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)**

Full Name (Last, First, Middle Initial) <b>A. Howard Frank</b>		Date of Receipt										
Mailing Address 500 Arvida Pkwy		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>05</td> <td>/</td> <td>16</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	05	/	16	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
05	/	16	/	2014								
City	State	Zip Code										
Miami	FL	33156-2321										
FEC ID number of contributing federal political committee.		Transaction ID : <b>A90243454726B4AB49BB</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
		5000.00										
Name of Employer	Occupation											
Carnival Corporation	Vice Chairman & Coo											
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	5000.00											

Full Name (Last, First, Middle Initial) <b>B. Douglas Frongillo</b>		Date of Receipt										
Mailing Address 10 Front Royal Isle		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>05</td> <td>/</td> <td>16</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	05	/	16	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
05	/	16	/	2014								
City	State	Zip Code										
Fort Lauderdale	FL	33308										
FEC ID number of contributing federal political committee.		Transaction ID : <b>A08C0A64628B44A42A8C</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
		250.00										
Name of Employer	Occupation											
Carnival Corporation	Director											
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	250.00											

Full Name (Last, First, Middle Initial) <b>C. Charles Fuchs</b>		Date of Receipt										
Mailing Address 19254 S Gardenia Ave		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>05</td> <td>/</td> <td>16</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	05	/	16	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
05	/	16	/	2014								
City	State	Zip Code										
Weston	FL	33332-4404										
FEC ID number of contributing federal political committee.		Transaction ID : <b>ADD7BFC7870724A999AC</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
		250.00										
Name of Employer	Occupation											
Carnival Corporation	Director Technology Audit Services											
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	250.00											

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<b>TOTAL</b> 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 9 OF 11  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. John Haeflinger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3353 W Stonebrook Cir  
 City State Zip Code  
 Davie FL 33330-1274  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Carnival Corporation Vice President  
 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  
 05 / 16 / 2014  
**Transaction ID : A96E4A3C7FB3746AEB61**  
 Amount of Each Receipt this Period  
 500.00

**B. Joshua Leibowitz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4270 N Hills Dr  
 City State Zip Code  
 Hollywood FL 33021-1802  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Carnival Corporation Executive Vice President  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 16 / 2014  
**Transaction ID : A6650BA72BF1F46408AD**  
 Amount of Each Receipt this Period  
 1000.00

**c. Mark O'Brien**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7261 SW 117th Ter  
 City State Zip Code  
 Miami FL 33156-4665  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Carnival Corporation Vice President Corporate Tax  
 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  
 05 / 16 / 2014  
**Transaction ID : AB3AE4099A29D475CBC6**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2000.00  
**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 OF 11  
(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)**

**A. Maria Victoria Rey**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6771 Parkinsonia Dr  
City Miami Lakes State FL Zip Code 33014-2649  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Carnival Cruise Lines Occupation VP - Guest Services  
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  
05 / 16 / 2014  
**Transaction ID : A13F8220983DB42F7BE7**  
Amount of Each Receipt this Period  
500.00

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	27100.00

**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. Friends of Corrine Brown**

Mailing Address 3563 Carriage Walk Lane

City Laurel State MD Zip Code 20724-2052

Purpose of Disbursement  
Contribution to Committee (MD)

Candidate Name

**Rep. Corrine Brown**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: FL District: 03

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 06 / 2014

**Transaction ID : BC710279267374185983**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Lee Terry for Congress**

Mailing Address PO Box 540098

City Omaha State NE Zip Code 68154-0098

Purpose of Disbursement  
Contributio to Committee (NE)

Candidate Name

**Rep. Lee Terry**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NE District: 02

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2014

**Transaction ID : B6EF53E6A56294F28AAD**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.**

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

Amount of Each Disbursement this Period

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

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

1500.00

1500.00