

**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 11
<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. Micky Arison		Date of Receipt MM / DD / YYYY 05 / 16 / 2014
Mailing Address 9999 Collins Ave		Transaction ID : A6F2E3587D0A2437B89A
City Miami	State FL	Zip Code 33134
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00	
Name of Employer Carnival Corporation	Occupation Chairman & CEO	
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. William Baumgartner		Date of Receipt MM / DD / YYYY 05 / 16 / 2014
Mailing Address PO Box 370128		Transaction ID : A952F25A9335A425FBC5
City Miami	State FL	Zip Code 33137-0128
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2000.00	
Name of Employer Royal Caribbean Cruise Line	Occupation SVP Marine Ops	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. William Burke		Date of Receipt MM / DD / YYYY 05 / 16 / 2014
Mailing Address 6301 Collins Ave #1903		Transaction ID : A063451DC478B4C11BF1
City Miami Beach	State FL	Zip Code 33141-4644
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1500.00	
Name of Employer Carnival Corporation	Occupation Chief Maritime Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
TOTAL This Period (last page this line number only).....▶	