

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
Horizon Lines Associates Good Government Fund

ADDRESS (number and street) 1050 CONNECTICUT AVENUE NW
SUITE 1200
 Check if different than previously reported. (ACC)
WASHINGTON DC 20036

2. **FEC IDENTIFICATION NUMBER** C00385179
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 01 01 2005 through 06 30 2005

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 Mark Blankenship

Signature of Treasurer Electronically Filed by Mark Blankenship Date 03 01 2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Horizon Lines Associates Good Government Fund

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	5

	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>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5		22541.95
Y	Y	Y	Y							
2	0	0	5							
(b) Cash on Hand at Beginning of Reporting Period	22541.95									
(c) Total Receipts (from Line 19)	28940.28	28940.28								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	51482.23	51482.23								
7. Total Disbursements (from Line 31)	17500.00	17500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	33982.23	33982.23								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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**

Write or Type Committee Name
Horizon Lines Associates Good Government Fund

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	5

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	21785.12	21785.12
(i) Itemized (use Schedule A)	7155.16	7155.16
(ii) Unitemized	28940.28	28940.28
(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)	28940.28	28940.28
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 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))	28940.28	28940.28
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	28940.28	28940.28

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	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.....	17500.00	17500.00
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))..	17500.00	17500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	17500.00	17500.00

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)	28940.28	28940.28
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28940.28	28940.28
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) or 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	

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NAME OF COMMITTEE (In Full)
Horizon Lines Associates Good Government Fund

A. Full Name (Last, First, Middle Initial)
William H Alverson

Mailing Address 1094 Touriga Place

City Pleasanton State CA Zip Code 94566

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

Name of Employer Horizon Lines Occupation Manager, Port operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 294.06

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 5

Transaction ID: SA11A1.4679

Amount of Each Receipt this Period
 175.68

payroll deduction

B. Full Name (Last, First, Middle Initial)
Charles Battiato

Mailing Address P.O. Box 894715

City Mililani State HI Zip Code 96789

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

Name of Employer Horizon Lines Occupation Manager, Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 249.75

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 5

Transaction ID: SA11A1.4682

Amount of Each Receipt this Period
 130.90

payroll deduction

C. Full Name (Last, First, Middle Initial)
Patricia Bowman

Mailing Address 2509 Landing View Lane

City Charlotte State NC Zip Code 28277

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

Name of Employer Horizon Lines Occupation Director Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 5

Transaction ID: SA11A1.4690

Amount of Each Receipt this Period
 120.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)	426.58
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or 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"/> 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	

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NAME OF COMMITTEE (In Full)
Horizon Lines Associates Good Government Fund

A. Full Name (Last, First, Middle Initial)
Jeff Brennan

Mailing Address 47-432 Waihee Rd

City Kaneohe State HI Zip Code 96744-4951

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

Name of Employer Horizon Lines Occupation Manager, Port Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 5

Transaction ID: SA11A1.4691

Amount of Each Receipt this Period
140.00

payroll deduction

B. Full Name (Last, First, Middle Initial)
Eric Britten

Mailing Address 17530 Steamboat Dr

City Anchorage State AK Zip Code 99516

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

Name of Employer Horizon Lines Occupation Manager, Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 5

Transaction ID: SA11A1.4692

Amount of Each Receipt this Period
210.00

payroll deduction

C. Full Name (Last, First, Middle Initial)
Marvin Buchanan

Mailing Address 6012 E Mercer Way

City Mercer Island State WA Zip Code 98040

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

Name of Employer Horizon Lines Occupation Director, Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 352.95

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.4613

Amount of Each Receipt this Period
352.95

payroll deduction

SUBTOTAL of Receipts This Page (optional)	702.95
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 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	

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NAME OF COMMITTEE (In Full)
Horizon Lines Associates Good Government Fund

A. Full Name (Last, First, Middle Initial)
Marvin Buchanan

Mailing Address 6012 E Mercer Way

City State Zip Code
Mercer Island WA 98040

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

Name of Employer Occupation
Horizon Lines Director, Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 837.67

Date of Receipt
MM / DD / YYYY
06 / 30 / 2005

Transaction ID: SA11A1.4693

Amount of Each Receipt this Period
484.72

payroll deduction

B. Full Name (Last, First, Middle Initial)
Denise Corbett

Mailing Address 9714 Shoal Creek Drive

City State Zip Code
Rowlett TX 75089

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

Name of Employer Occupation
Horizon Lines Director Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 246.06

Date of Receipt
MM / DD / YYYY
03 / 31 / 2005

Transaction ID: SA11A1.4618

Amount of Each Receipt this Period
246.06

payroll deduction

C. Full Name (Last, First, Middle Initial)
Denise Corbett

Mailing Address 9714 Shoal Creek Drive

City State Zip Code
Rowlett TX 75089

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

Name of Employer Occupation
Horizon Lines Director Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 583.98

Date of Receipt
MM / DD / YYYY
06 / 30 / 2005

Transaction ID: SA11A1.4700

Amount of Each Receipt this Period
337.92

payroll deduction

SUBTOTAL of Receipts This Page (optional)	▶	1068.70
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or 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"/> 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	

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NAME OF COMMITTEE (In Full)
Horizon Lines Associates Good Government Fund

A. Full Name (Last, First, Middle Initial)
Tricia Anne Covais

Mailing Address 901 Autumn Ridge Road

City State Zip Code
McKinney TX 75070

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

Name of Employer Occupation
Horizon Lines Director, Information Systems

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 343.76

Date of Receipt
MM / DD / YYYY
06 / 30 / 2005

Transaction ID: SA11A1.4701

Amount of Each Receipt this Period
200.00

payroll deduction

B. Full Name (Last, First, Middle Initial)
Marion G. Davis

Mailing Address 11511 Brayton Drive C1

City State Zip Code
Anchorage AK 98516

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

Name of Employer Occupation
Horizon Lines Director, operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2005

Transaction ID: SA11A1.4620

Amount of Each Receipt this Period
325.00

payroll deduction

C. Full Name (Last, First, Middle Initial)
Marion G. Davis

Mailing Address 11511 Brayton Drive C1

City State Zip Code
Anchorage AK 98516

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

Name of Employer Occupation
Horizon Lines Director, operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2005

Transaction ID: SA11A1.4702

Amount of Each Receipt this Period
375.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)	▶	900.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 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

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NAME OF COMMITTEE (In Full)
Horizon Lines Associates Good Government Fund

A. Full Name (Last, First, Middle Initial) Kelly Dennison		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 5
Mailing Address 4409 Mariannes Ridge Road		Transaction ID: SA11A1.4704
City State Zip Code Charlotte NC 28273	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	payroll deduction	
Name of Employer Occupation Horizon Lines Director, Corp Marketing	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Dan Downes		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 5
Mailing Address 12956 Se 301st St		Transaction ID: SA11A1.4706
City State Zip Code Auburn WA 98092	Amount of Each Receipt this Period 176.80	
FEC ID number of contributing federal political committee. C	payroll deduction	
Name of Employer Occupation Horizon Lines Director, Marketing	Aggregate Year-to-Date ▼ 305.56	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Lori A Galloway		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 5
Mailing Address P.O. Box 111393		Transaction ID: SA11A1.4712
City State Zip Code Anchorage AK 99511	Amount of Each Receipt this Period 210.00	
FEC ID number of contributing federal political committee. C	payroll deduction	
Name of Employer Occupation Horizon Lines Manager, Port Operations	Aggregate Year-to-Date ▼ 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	586.80
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 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)
Horizon Lines Associates Good Government Fund

Full Name (Last, First, Middle Initial) A. James Garrahan		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2005
Mailing Address 73 Paseo De Orguideas		Transaction ID: SA11A1.4713
City	State	Zip Code
Trujillo Alto	PR	00976
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Horizon Lines	Occupation Manager, Sales	payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Claudette Hilbun		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2005
Mailing Address 1413 Swallow Circle		Transaction ID: SA11A1.4718
City	State	Zip Code
Lewisville	TX	75077
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer Horizon lines	Occupation Director, Finance and Accounting	payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. John Keenan		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2005
Mailing Address 3030 Woodhollow Drive		Transaction ID: SA11A1.4769
City	State	Zip Code
Highland View	TX	75077
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Horizon Lines	Occupation Senior VP , OPerations and COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional)	▶	2820.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 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

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NAME OF COMMITTEE (In Full)
Horizon Lines Associates Good Government Fund

A. Full Name (Last, First, Middle Initial)
Rich Kessler

Mailing Address 3123 Overlook Circle

City Hilland Village State TX Zip Code 75077

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

Name of Employer Horizon Services Occupation Vice president

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 403.75

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2005

Transaction ID: SA11A1.4638

Amount of Each Receipt this Period
 403.75

payroll deduction

B. Full Name (Last, First, Middle Initial)
Rich Kessler

Mailing Address 3123 Overlook Circle

City Hilland Village State TX Zip Code 75077

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

Name of Employer Horizon Services Occupation Vice president

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 970.27

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2005

Transaction ID: SA11A1.4724

Amount of Each Receipt this Period
 566.52

payroll deduction

C. Full Name (Last, First, Middle Initial)
David G. Kolesky

Mailing Address 861 Hunt Circle

City Anchorage State AK Zip Code 99504

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

Name of Employer Horizon Lines Occupation Outside Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2005

Transaction ID: SA11A1.4674

Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional)	▶	1270.27
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 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	

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NAME OF COMMITTEE (In Full)
Horizon Lines Associates Good Government Fund

A. Full Name (Last, First, Middle Initial) Marv Labrador		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2005	
Mailing Address P.O. Box 8897		Transaction ID: SA11A1.4639	
City Tamuning	State GU	Zip Code 96931	Amount of Each Receipt this Period 267.94
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Horizon Lines	Occupation General Manager, Country Mgmt		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 267.94		

B. Full Name (Last, First, Middle Initial) Marv Labrador		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2005	
Mailing Address P.O. Box 8897		Transaction ID: SA11A1.4725	
City Tamuning	State GU	Zip Code 96931	Amount of Each Receipt this Period 295.12
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Horizon Lines	Occupation General Manager, Country Mgmt		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 563.06		

C. Full Name (Last, First, Middle Initial) Edward Lagoy		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2005	
Mailing Address 555 S. Renton Village Pl		Transaction ID: SA11A1.4640	
City Renton	State WA	Zip Code 98055	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Horizon Lines	Occupation General Manager, Sales		
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)	863.06
TOTAL This Period (last page this line number only)	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 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	

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NAME OF COMMITTEE (In Full)
Horizon Lines Associates Good Government Fund

A. Full Name (Last, First, Middle Initial)
Edward R Lagoy

Mailing Address 555 S Renton Village Pl Ste 60

City Renton State WA Zip Code 98055

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

Name of Employer Horizon Lines Occupation General Manager, Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 3 0 / 2 0 0 5

Transaction ID: SA11A1.4726

Amount of Each Receipt this Period
 400.00

payroll deduction

B. Full Name (Last, First, Middle Initial)
Mike A Lynch

Mailing Address P.O. Box 921127

City Dutch Hart State AK Zip Code 99692

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

Name of Employer Horizon Lines Occupation Manager, Port Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 3 0 / 2 0 0 5

Transaction ID: SA11A1.4727

Amount of Each Receipt this Period
 140.00

payroll deduction

C. Full Name (Last, First, Middle Initial)
Dennis McCarthy

Mailing Address 7002 Seton House Lane

City Charlotte State NC Zip Code 28277

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

Name of Employer Horizon Lines Occupation Staff VP Human resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 458.38

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 3 0 / 2 0 0 5

Transaction ID: SA11A1.4728

Amount of Each Receipt this Period
 265.24

payroll deduction

SUBTOTAL of Receipts This Page (optional)	▶	805.24
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 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)
Horizon Lines Associates Good Government Fund

Full Name (Last, First, Middle Initial) A. Glendon I Moyer		Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2005	
Mailing Address 883 Shadowbrook Road		Transaction ID: SA11A1.4677	
City Ridgewood	State NJ	Zip Code 07450-2932	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Horizon Lines	Occupation General Manager, port operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Ku Park		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2005	
Mailing Address 965 Maunawili Cir		Transaction ID: SA11A1.4735	
City Kailua	State HI	Zip Code 96734-4620	Amount of Each Receipt this Period 161.84
FEC ID number of contributing federal political committee. C			
Name of Employer Horizon Lines	Occupation Manager, Government Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 308.70		

payroll deduction

Full Name (Last, First, Middle Initial) C. Kenneth Privratsky		Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2005	
Mailing Address 7201 Montagne Circle		Transaction ID: SA11A1.4678	
City Anchorage	State AK	Zip Code 99507	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Horizon Lines	Occupation VP Country Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

SUBTOTAL of Receipts This Page (optional) ▶	3661.84
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 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	

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NAME OF COMMITTEE (In Full)
Horizon Lines Associates Good Government Fund

A. Full Name (Last, First, Middle Initial)
Charles G. Raymond

Mailing Address 9015 Winged Bourne Rd

City State Zip Code
Charlotte NC 28210

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

Name of Employer Horizon Lines Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1395.83

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2005

Transaction ID: SA11A1.4648

Amount of Each Receipt this Period
1395.83

payroll deduction

B. Full Name (Last, First, Middle Initial)
Charles G. Raymond

Mailing Address 9015 Winged Bourne Rd

City State Zip Code
Charlotte NC 28210

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

Name of Employer Horizon Lines Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3312.51

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2005

Transaction ID: SA11A1.4739

Amount of Each Receipt this Period
1916.68

payroll deduction

C. Full Name (Last, First, Middle Initial)
Samuel Raymond

Mailing Address 6143 Cedar Croft Drive

City State Zip Code
Charlotte NC 28266

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

Name of Employer Horizon Lines Occupation Manager, Performance Monitoring

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.10

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2005

Transaction ID: SA11A1.4741

Amount of Each Receipt this Period
274.68

payroll deduction

SUBTOTAL of Receipts This Page (optional)	▶	3587.19
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 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	

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NAME OF COMMITTEE (In Full)
Horizon Lines Associates Good Government Fund

A. Full Name (Last, First, Middle Initial)
Domingo Rodriguez

Mailing Address PO Box 360945

City San Juan State PR Zip Code 00936

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

Name of Employer Horizon Lines Occupation Manager, Finance and Accounting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.64

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.4650

Amount of Each Receipt this Period
215.64

payroll deduction

B. Full Name (Last, First, Middle Initial)
Domingo Rodriguez

Mailing Address PO Box 360945

City San Juan State PR Zip Code 00936

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

Name of Employer Horizon Lines Occupation Manager, Finance and Accounting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 511.80

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 5

Transaction ID: SA11A1.4746

Amount of Each Receipt this Period
296.16

payroll deduction

C. Full Name (Last, First, Middle Initial)
Jose Rodriguez

Mailing Address ALTURAS DE TORRIMAR CALLE 7 #15-1

City Guaynabo State PR Zip Code 00969

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

Name of Employer Horizon Lines Occupation General Manager, Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 306.68

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 5

Transaction ID: SA11A1.4745

Amount of Each Receipt this Period
177.92

payroll deduction

SUBTOTAL of Receipts This Page (optional)	▶	689.72
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 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

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NAME OF COMMITTEE (In Full)
Horizon Lines Associates Good Government Fund

Full Name (Last, First, Middle Initial) A. Claudia D Russell		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2005	
Mailing Address 16301 Golden View Drive		Transaction ID: SA11A1.4670	
City Anchorage	State AK	Zip Code 99516	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C			
Name of Employer Horizon Lines	Occupation Manager, Customer Service		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. Ketan Shah		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2005	
Mailing Address 4413 Ironwood Drive		Transaction ID: SA11A1.4748	
City Flower Mound	State TX	Zip Code 75028	Amount of Each Receipt this Period 270.00
FEC ID number of contributing federal political committee. C			
Name of Employer Horizon Lines	Occupation IT Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

payroll deduction

Full Name (Last, First, Middle Initial) C. Duane Smith		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2005	
Mailing Address 20342 NE 34th Ct		Transaction ID: SA11A1.4771	
City Sammamish	State WA	Zip Code 98074	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Horizon Lnes	Occupation General Manager Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	1170.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 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	

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NAME OF COMMITTEE (In Full)
Horizon Lines Associates Good Government Fund

A. Full Name (Last, First, Middle Initial)
Claudia Stone

Mailing Address 3 Atwood Avenue

City State Zip Code
Pompton Plains NJ 07444

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

Name of Employer Occupation
Horizon Lines Assistant General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 339.11

Date of Receipt
06 / 30 / 2005

Transaction ID: SA11A1.4753

Amount of Each Receipt this Period
206.00

payroll deduction

B. Full Name (Last, First, Middle Initial)
Brian Taylor

Mailing Address 150 Kaapuni Drive

City State Zip Code
Kallua HI 96734

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

Name of Employer Occupation
Horizon Lines VP Country Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 288.45

Date of Receipt
03 / 31 / 2005

Transaction ID: SA11A1.4658

Amount of Each Receipt this Period
288.45

payroll deduction

C. Full Name (Last, First, Middle Initial)
Brian Taylor

Mailing Address 150 Kaapuni Drive

City State Zip Code
Kallua HI 96734

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

Name of Employer Occupation
Horizon Lines VP Country Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 746.01

Date of Receipt
06 / 30 / 2005

Transaction ID: SA11A1.4757

Amount of Each Receipt this Period
457.56

payroll deduction

SUBTOTAL of Receipts This Page (optional)	952.01
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 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)
Horizon Lines Associates Good Government Fund

Full Name (Last, First, Middle Initial) A. Francisco Tollinche		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 5	
Mailing Address Aa-6 Azalea St, Alt Borinquen Gard		Transaction ID: SA11A1.4758	
City Rio Piedras State PR Zip Code 00926	Amount of Each Receipt this Period 120.00		
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Horizon Lines	Occupation Outside Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) B. Matthew Urbania		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 5	
Mailing Address 3034 Shillington Place		Transaction ID: SA11A1.4761	
City Charlotte State NC Zip Code 28210	Amount of Each Receipt this Period 664.00		
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Horizon Lines	Occupation VP & CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 664.00		

Full Name (Last, First, Middle Initial) C. Derick A Wright		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 5	
Mailing Address 5905 Sand SHell Court		Transaction ID: SA11A1.4764	
City Dallas State TX Zip Code 75252	Amount of Each Receipt this Period 327.76		
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Horizon Lines	Occupation Manager, Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 406.93		

SUBTOTAL of Receipts This Page (optional) ▶	1111.76
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 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)
Horizon Lines Associates Good Government Fund

A. Full Name (Last, First, Middle Initial)
Robert Zuckerman

Mailing Address 19233 Hidden Cove Lane

City State Zip Code
Cornelius NC 28031

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

Name of Employer Horizon Lines Occupation VP Legal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
501.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	5

Transaction ID: SA11A1.4669

Amount of Each Receipt this Period
501.00

payroll deduction

B. Full Name (Last, First, Middle Initial)
Robert Zuckerman

Mailing Address 19233 Hidden Cove Lane

City State Zip Code
Cornelius NC 28031

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

Name of Employer Horizon Lines Occupation VP Legal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1169.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	5

Transaction ID: SA11A1.4765

Amount of Each Receipt this Period
668.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)	▶	1169.00
TOTAL This Period (last page this line number only)	▶	21785.12

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)
Horizon Lines Associates Good Government Fund

Full Name (Last, First, Middle Initial) A. ABERCROMBIE FOR CONGRESS		Transaction ID: SB23.4772 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 5
Mailing Address c/o 1357 Kapiolani Blvd. Ste. 1005 c/o 1357 Kapiolani Blvd. Ste. 1005		Amount of Each Disbursement this Period 1000.00
City Honolulu State HI Zip Code 96814	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 01	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Crenshaw for Congress		Transaction ID: SB23.4787 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 5
Mailing Address 5345 ORTEGA BOULEVARD SUITE 11		Amount of Each Disbursement this Period 5000.00
City JACKSONVILLE State FL Zip Code 32210	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 04	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. FRIENDS OF DUKE CUNNINGHAM		Transaction ID: SB23.4781 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 5
Mailing Address 4710 FOURTH ST #100		Amount of Each Disbursement this Period 1000.00
City LA MESA State CA Zip Code 91941	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 50	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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)

PAGE 23 / 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)
Horizon Lines Associates Good Government Fund

Full Name (Last, First, Middle Initial) A. MENENDEZ FOR CONGRESS		Transaction ID: SB23.4785 Date of Disbursement 06 / 13 / 2005	
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 1000.00	
City Union City	State NJ		Zip Code 07087
Purpose of Disbursement			Category/ Type
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NJ District: 13			

Full Name (Last, First, Middle Initial) B. PASTOR FOR ARIZONA		Transaction ID: SB23.4788 Date of Disbursement 06 / 20 / 2005	
Mailing Address PO BOX 6554		Amount of Each Disbursement this Period 1000.00	
City PHOENIX	State AZ		Zip Code 85005
Purpose of Disbursement			Category/ Type
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: AZ District: 04			

Full Name (Last, First, Middle Initial) C. SAXTON, H. J		Transaction ID: SB23.4777 Date of Disbursement 03 / 07 / 2005	
Mailing Address PO Box 795		Amount of Each Disbursement this Period 1500.00	
City Mt. Holly	State NJ		Zip Code 08060
Purpose of Disbursement			Category/ Type
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NJ District: 3			

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)

PAGE 24 / 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)
Horizon Lines Associates Good Government Fund

Full Name (Last, First, Middle Initial) A. STEVENS FOR SENATE COMMITTEE		Transaction ID: SB23.4783 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 5
Mailing Address PO BOX 100879		Amount of Each Disbursement this Period 5000.00
City ANCHORAGE State AK Zip Code 99510	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. VITTER, DAVID B		Transaction ID: SB23.4775 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 5
Mailing Address 238 HELICE AVENUE		Amount of Each Disbursement this Period 1000.00
City METAIRIE State LA Zip Code 70005	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. YOUNG, DON E		Transaction ID: SB23.4779 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 5
Mailing Address 2504 FAIRBANKS STREET		Amount of Each Disbursement this Period 1000.00
City ANCHORAGE State AK Zip Code 99503	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	17500.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
Horizon Lines Associates Good Government Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor BSY Associates	Nature of Debt (Purpose): design, production of printed materials
Mailing Address 195 Fairfield Ave. Suite 4D	
City State ZIP Code West Caldwell NJ 07006	

Outstanding Balance Beginning This Period -3770.00	Transaction ID: SD10.4121	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period -3770.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor BSY Associates	Nature of Debt (Purpose): design, production of printed materials
Mailing Address 195 Fairfield Ave. Suite 4D	
City State ZIP Code West Caldwell NJ 07006	

Outstanding Balance Beginning This Period 3770.00	Transaction ID: SD10.4120	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3770.00

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	0.00
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	