

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, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

ADDRESS (number and street) 1050 Connecticut Ave NW

Suite 1200 c/o T. WALLS

Check if different than previously reported. (ACC) WASHINGTON DC 20036

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00385179

3. IS THIS REPORT NEW (N) OR AMENDED (A) 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:
- | | | | |
|--------------------------------------|---|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input checked="" type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on _____ in the State of _____

- (d) 30-Day Post -Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 06 01 2008 through 06 30 2008

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 17 2011

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

Horizon Lines, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 6 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

 To:

| | |
|---|---|
| M | M |
| 0 | 6 |

| | |
|---|---|
| D | D |
| 3 | 0 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

| | 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>8</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 8 | | 75097.41 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 8 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 87369.76 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 3631.67 | 27293.68 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 91001.43 | 102391.09 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 4617.55 | 16007.21 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 86383.88 | 86383.88 | | | | | | | | |
| 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**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Horizon Lines, LLC Associates Good Government Fund/Horizon Lines Associates Good
Govt Fu

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) | 3038.67 | 18270.98 |
| (ii) Unitemized | 593.00 | 9022.70 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 3631.67 | 27293.68 |
| (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) | 3631.67 | 27293.68 |
| 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)) | 3631.67 | 27293.68 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 3631.67 | 27293.68 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

| 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..... | 117.55 | 507.21 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶ | 117.55 | 507.21 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 4500.00 | 15500.00 |
| 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)).. | 4617.55 | 16007.21 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 4617.55 | 16007.21 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 18

| 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) | 3631.67 | 27293.68 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 3631.67 | 27293.68 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 117.55 | 507.21 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 117.55 | 507.21 |

**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 / 18 |
| | <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)
Horizon Lines, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

| | | | |
|---|---|------------------------------|---|
| A. | Full Name (Last, First, Middle Initial) Charles Battiato | | Date of Receipt |
| | Mailing Address P.O. Box 894715 | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y |
| | City | State | Zip Code |
| | Mililani | HI | 96789 |
| | FEC ID number of contributing federal political committee. | | <input type="text"/> C <input type="text"/> |
| Name of Employer Horizon Lines | | Occupation Manager, Sales | Transaction ID: SA11AI.7316 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period |
| | | <input type="text"/> 304.98 | <input type="text"/> 51.33 |
| payroll deduction monthly | | | |

| | | | |
|---|--|-----------------------------|---|
| B. | Full Name (Last, First, Middle Initial) Thomas M Bellerud | | Date of Receipt |
| | Mailing Address 3607 22nd St SE | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y |
| | City | State | Zip Code |
| | Puyallup | WA | 98374 |
| | FEC ID number of contributing federal political committee. | | <input type="text"/> C <input type="text"/> |
| Name of Employer Horizon Lines | | Occupation Outside Sales | Transaction ID: SA11AI.7311 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period |
| | | <input type="text"/> 240.00 | <input type="text"/> 40.00 |
| payroll deduction monthly | | | |

| | | | |
|---|--|-------------------------------|---|
| C. | Full Name (Last, First, Middle Initial) Alfred Bozzuffi | | Date of Receipt |
| | Mailing Address 159 Bergen Street | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y |
| | City | State | Zip Code |
| | Brooklyn | NY | 11217 |
| | FEC ID number of contributing federal political committee. | | <input type="text"/> C <input type="text"/> |
| Name of Employer Horizon Lines | | Occupation Naval Architect | Transaction ID: SA11AI.7278 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period |
| | | <input type="text"/> 248.51 | <input type="text"/> 42.03 |
| payroll deduction monthly | | | |

| | |
|--|-----------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text"/> 133.36 |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

**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 / 18 |
| | <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, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

| | | | |
|---|---|--|---|
| A. | Full Name (Last, First, Middle Initial) Jeff Brennan | | Date of Receipt MM / DD / YYYY 06 / 26 / 2008 |
| | Mailing Address 47-432 Waihee Rd | | Transaction ID: SA11AI.7325 |
| | City Kaneohe | State HI | Zip Code 96744-4951 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 40.00 |
| | Name of Employer Horizon Lines | Occupation Manager, Port Operations | payroll deduction weekly |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 270.00 | |

| | | | |
|---|---|------------------------------------|---|
| B. | Full Name (Last, First, Middle Initial) Eric Britten | | Date of Receipt MM / DD / YYYY 06 / 26 / 2008 |
| | Mailing Address 17530 Steamboat Dr | | Transaction ID: SA11AI.7327 |
| | City Anchorage | State AK | Zip Code 99516 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 60.00 |
| | Name of Employer Horizon Lines | Occupation Manager, Sales | payroll deduction weekly |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 390.00 | |

| | | | |
|---|---|------------------------------------|---|
| C. | Full Name (Last, First, Middle Initial) Marvin Buchanan | | Date of Receipt MM / DD / YYYY 06 / 30 / 2008 |
| | Mailing Address 6012 E Mercer Way | | Transaction ID: SA11AI.7298 |
| | City Mercer Island | State WA | Zip Code 98040 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 133.53 |
| | Name of Employer Horizon Lines | Occupation Director, Marketing | payroll deduction monthly |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 793.40 | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 233.53 |
| 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 8 / 18 |
| | <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, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

A.

Full Name (Last, First, Middle Initial)
Erica Compton

Mailing Address 4838 Gurley Ave

City State Zip Code
Dallas TX 75223

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

Name of Employer Occupation
Horizon Lines Manager, Collections

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 415.80

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.7338

Amount of Each Receipt this Period
70.20

payroll deduction monthly

B.

Full Name (Last, First, Middle Initial)
Tricia Anne Covais-Perhirin

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 ▼ 372.46

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.7282

Amount of Each Receipt this Period
62.28

payroll deduction monthly

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 ▼ 650.00

Date of Receipt
MM / DD / YYYY
06 / 26 / 2008

Transaction ID: SA11AI.7337

Amount of Each Receipt this Period
100.00

payroll deduction weekly

SUBTOTAL of Receipts This Page (optional) ► **232.48**

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 / 18 |
| | <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, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

A.

Full Name (Last, First, Middle Initial)
Dan Downes

Mailing Address 12956 Se 301st St

City State Zip Code
Auburn WA 98092

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 ▼ 327.34

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.7318

Amount of Each Receipt this Period
54.67

payroll deduction monthly

B.

Full Name (Last, First, Middle Initial)
Lori A Galloway

Mailing Address P.O. Box 111393

City State Zip Code
Anchorage AK 99511

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

Name of Employer Occupation
Horizon Lines Manager, Port Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt
MM / DD / YYYY
06 / 26 / 2008

Transaction ID: SA11AI.7328

Amount of Each Receipt this Period
60.00

payroll deduction weekly

C.

Full Name (Last, First, Middle Initial)
James Garrahan

Mailing Address 73 Paseo De Orguideas

City State Zip Code
Trujillo Alto PR 00976

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

Name of Employer Occupation
Horizon Lines Manager, Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.7277

Amount of Each Receipt this Period
50.00

payroll deduction monthly

SUBTOTAL of Receipts This Page (optional) ► **164.67**

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 10 / 18 |
| | <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, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

| | | | |
|-----------|--|--|---|
| A. | Full Name (Last, First, Middle Initial) John Handy | | Date of Receipt MM / DD / YYYY 06 / 30 / 2008 |
| | Mailing Address 10709 Hermit Thrush Ln | | Transaction ID: SA11AI.7291 |
| | City Charlotte | State NC | Zip Code 28278 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 298.30 |
| | Name of Employer Horizon Lines | Occupation Executive Vice President | payroll deduction monthly |

| | |
|---|------------------------------------|
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 894.96 |
|---|------------------------------------|

| | | | |
|-----------|--|--|---|
| B. | Full Name (Last, First, Middle Initial) Paul F Hydock | | Date of Receipt MM / DD / YYYY 06 / 30 / 2008 |
| | Mailing Address 5890 Tarta Tropicana Condo | | Transaction ID: SA11AI.7289 |
| | City Carolina | State PR | Zip Code 00979 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 34.96 |
| | Name of Employer Horizon Lines | Occupation Director, Agency and Logistics | payroll deduction monthly |

| | |
|---|------------------------------------|
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 207.72 |
|---|------------------------------------|

| | | | |
|-----------|--|---|---|
| C. | Full Name (Last, First, Middle Initial) Sabrina M Jackson | | Date of Receipt MM / DD / YYYY 06 / 30 / 2008 |
| | Mailing Address 3106 Indian Trail Ct | | Transaction ID: SA11AI.7297 |
| | City Rowlett | State TX | Zip Code 75088 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 56.65 |
| | Name of Employer Horizon Lines | Occupation OTC Documenting and Finance | payroll deduction monthly |

| | |
|---|------------------------------------|
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 336.60 |
|---|------------------------------------|

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 389.91 |
| 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 11 / 18 |
| | <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, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

| | | |
|---|---|---|
| A. | Full Name (Last, First, Middle Initial) Rich Kessler | Date of Receipt MM / DD / YYYY 06 / 30 / 2008 |
| | Mailing Address 3123 Overlook Circle | Transaction ID: SA11AI.7308 |
| | City Hilland Village State TX Zip Code 75077 | Amount of Each Receipt this Period 157.76 |
| | FEC ID number of contributing federal political committee. C | payroll deduction monthly |
| Name of Employer Horizon Services Occupation Vice president | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 937.38 | |

| | | |
|---|---|---|
| B. | Full Name (Last, First, Middle Initial) Marv Labrador | Date of Receipt MM / DD / YYYY 06 / 26 / 2008 |
| | Mailing Address P.O. Box 8897 | Transaction ID: SA11AI.7324 |
| | City Tamuning State GU Zip Code 96931 | Amount of Each Receipt this Period 120.00 |
| | FEC ID number of contributing federal political committee. C | payroll deduction weekly |
| 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 ▼ 780.00 | |

| | | |
|---|---|---|
| C. | Full Name (Last, First, Middle Initial) Mike A Lynch | Date of Receipt MM / DD / YYYY 06 / 26 / 2008 |
| | Mailing Address P.O. Box 921127 | Transaction ID: SA11AI.7329 |
| | City Dutch Hart State AK Zip Code 99692 | Amount of Each Receipt this Period 40.00 |
| | FEC ID number of contributing federal political committee. C | payroll deduction weekly |
| Name of Employer Horizon Lines Occupation Manager, Port Operations | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 260.00 | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 317.76 |
| 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 12 / 18 |
| | <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, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

| | | | |
|---|---|---|--|
| A. | Full Name (Last, First, Middle Initial) Linda L Montgomery | | Date of Receipt |
| | Mailing Address 157 Simmons Drive | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 30 / 2008 |
| | City | State | Zip Code |
| | Copell | TX | 75019 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.7309 |
| Name of Employer Horizon Lines | | Occupation Manager, Outbound Documentation | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 216.92 | <input type="text"/> 36.45 |
| | | | payroll deduction monthly |

| | | | |
|---|---|---|--|
| B. | Full Name (Last, First, Middle Initial) Ku Park | | Date of Receipt |
| | Mailing Address 965 Maunawili Cir | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 26 / 2008 |
| | City | State | Zip Code |
| | Kailua | HI | 96734-4620 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.7334 |
| Name of Employer Horizon Lines | | Occupation Manager, Government Relations | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 325.42 | <input type="text"/> 50.52 |
| | | | payroll deduction weekly |

| | | | |
|---|---|------------------------------------|--|
| C. | Full Name (Last, First, Middle Initial) Huei-Ning Pee | | Date of Receipt |
| | Mailing Address 1839 Darnell Circle | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 30 / 2008 |
| | City | State | Zip Code |
| | Frisco | TX | 75056 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.7303 |
| Name of Employer Horizon Lines | | Occupation Manager Applications | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 530.24 | <input type="text"/> 89.52 |
| | | | payroll deduction monthly |

| | |
|--|--------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text"/> 176.49 |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 18
(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, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

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 Occupation
Horizon Lines President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3199.98

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.7272

Amount of Each Receipt this Period
533.33

payroll deduction monthly

B.

Full Name (Last, First, Middle Initial)
Sam 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 Occupation
Horizon Lines Manager, Performance Monitoring

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
521.08

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.7280

Amount of Each Receipt this Period
85.83

payroll deduction monthly

C.

Full Name (Last, First, Middle Initial)
Dave Rodger

Mailing Address 149 Blauvelt Ave

City State Zip Code
Ho Ho Kus NJ 07423

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

Name of Employer Occupation
Horizon Lines Director, Technical Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.7281

Amount of Each Receipt this Period
42.00

payroll deduction monthly

SUBTOTAL of Receipts This Page (optional) ► **661.16**

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 14 / 18 |
| | <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, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

| | | | | | |
|-----------|---|---|---|---|--|
| A. | Full Name (Last, First, Middle Initial) Domingo Rodriguez | | Date of Receipt MM / DD / YYYY 06 / 30 / 2008 | | |
| | Mailing Address PO Box 360945 | | Transaction ID: SA11AI.7322 | | |
| | City San Juan | State PR | Zip Code 00936 | Amount of Each Receipt this Period 81.77 | |
| | FEC ID number of contributing federal political committee. C | | payroll deduction monthly | | |
| | Name of Employer Horizon Lines | Occupation Manager, Finance and Accounting | | | |
| | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 486.24 | | | |

| | | | | | |
|-----------|---|--------------------------------------|---|---|--|
| B. | Full Name (Last, First, Middle Initial) Jose Rodriguez | | Date of Receipt MM / DD / YYYY 06 / 30 / 2008 | | |
| | Mailing Address ALTURAS DE TORRIMAR CALLE 7 #15-1 | | Transaction ID: SA11AI.7302 | | |
| | City Guaynabo | State PR | Zip Code 00969 | Amount of Each Receipt this Period 57.83 | |
| | FEC ID number of contributing federal political committee. C | | payroll deduction monthly | | |
| | 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 ▼ 344.28 | | | |

| | | | | | |
|-----------|---|---|---|---|--|
| C. | Full Name (Last, First, Middle Initial) Claudia Stone | | Date of Receipt MM / DD / YYYY 06 / 30 / 2008 | | |
| | Mailing Address 3 Atwood Avenue | | Transaction ID: SA11AI.7286 | | |
| | City Pompton Plains | State NJ | Zip Code 07444 | Amount of Each Receipt this Period 54.64 | |
| | FEC ID number of contributing federal political committee. C | | payroll deduction monthly | | |
| | Name of Employer Horizon Lines | Occupation Representative/ Temp/Misc | | | |
| | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 324.66 | | | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 194.24 |
| 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 15 / 18 |
| | <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, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

| | | | | | |
|-----------|--|-------------------------------------|---|--|--|
| A. | Full Name (Last, First, Middle Initial) Brian Taylor | | Date of Receipt MM / DD / YYYY 06 / 30 / 2008 | | |
| | Mailing Address 150 Kaapuni Drive | | Transaction ID: SA11AI.7323 | | |
| | City Kallua | State HI | Zip Code 96734 | Amount of Each Receipt this Period 270.83 | |
| | FEC ID number of contributing federal political committee. C | | payroll deduction monthly | | |
| | Name of Employer Horizon Lines | Occupation VP Country Management | | Aggregate Year-to-Date 1624.98 | |

| | | | | | |
|-----------|--|----------------------------------|---|---|--|
| B. | Full Name (Last, First, Middle Initial) Duncan Wright | | Date of Receipt MM / DD / YYYY 06 / 30 / 2008 | | |
| | Mailing Address 5411 Vanderbilt Avenue | | Transaction ID: SA11AI.7292 | | |
| | City Dallas | State TX | Zip Code 75206 | Amount of Each Receipt this Period 97.24 | |
| | FEC ID number of contributing federal political committee. C | | payroll deduction monthly | | |
| | Name of Employer Horizon Lines | Occupation Manager, Marketing | | Aggregate Year-to-Date 565.76 | |

| | | | | | |
|-----------|--|------------------------|---|--|--|
| C. | Full Name (Last, First, Middle Initial) Robert Zuckerman | | Date of Receipt MM / DD / YYYY 06 / 30 / 2008 | | |
| | Mailing Address 19233 Hidden Cove Lane | | Transaction ID: SA11AI.7276 | | |
| | City Cornelius | State NC | Zip Code 28031 | Amount of Each Receipt this Period 167.00 | |
| | FEC ID number of contributing federal political committee. C | | payroll deduction monthly | | |
| | Name of Employer Horizon Lines | Occupation VP Legal | | Aggregate Year-to-Date 1002.00 | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 535.07 |
| TOTAL This Period (last page this line number only) | 3038.67 |

**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 16 / 18

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 21b | <input type="checkbox"/> | 22 | <input 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, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 101 Sout Tryon St

City State Zip Code
Charlotte NC 28253

Purpose of Disbursement
bank fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.7265

Date of Disbursement

06 / 16 / 2008

Amount of Each Disbursement this Period

117.55

SUBTOTAL of Disbursements This Page (optional)

117.55

TOTAL This Period (last page this line number only)

117.55

**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 17 / 18

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

| | | |
|----|---|--|
| A. | Full Name (Last, First, Middle Initial) DAVID VITTER FOR US SENATE | Transaction ID: SB23.7267 |
| | Mailing Address PO BOX 8175 | Date of Disbursement MM / DD / YYYY 06 / 02 / 2008 |
| | City METAIRIE State LA Zip Code 70011 | Amount of Each Disbursement this Period 1000.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 00 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. | Full Name (Last, First, Middle Initial) IKE SKELTON FOR CONGRESS COMMITTEE | Transaction ID: SB23.7270 |
| | Mailing Address P.O. Box A | Date of Disbursement MM / DD / YYYY 06 / 21 / 2008 |
| | City Harrisonville State MO Zip Code 64701 | Amount of Each Disbursement this Period 2500.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 04 | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. | Full Name (Last, First, Middle Initial) VIRGINIA FOXX FOR CONGRESS | Transaction ID: SB23.7269 |
| | Mailing Address P.O. Box 1100 | Date of Disbursement MM / DD / YYYY 06 / 10 / 2008 |
| | City Clemmons State NC Zip Code 27012 | Amount of Each Disbursement this Period 1000.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 05 | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

4500.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | | |
|---|--------------------------------------|--|
| (Use separate schedule(s) for each numbered line) | PAGE 18 / 18 | |
| | FOR LINE NUMBER: (check only one) | <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
 Horizon Lines, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

| | |
|---|--|
| 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) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | 0.00 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | 0.00 |