

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 ZIPCODE

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:
- | | | | |
|---|--------------------------------------|---------------------------------------|--|
| <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 checked="" type="checkbox"/> Apr 20 (M4) | <input 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 (12G) | |

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 03 01 2007 through 03 31 2007

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 04 20 2007

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							
-----------------	--	--	--	--	--	--	--

**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	3

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		68461.92
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	72086.12									
(c) Total Receipts (from Line 19)	3714.43	12066.63								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	75800.55	80528.55								
7. Total Disbursements (from Line 31)	5544.39	10272.39								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	70256.16	70256.16								
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, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	2089.81	4898.59
(i) Itemized (use Schedule A)	1624.62	7168.04
(ii) Unitemized	3714.43	12066.63
(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)	3714.43	12066.63
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))	3714.43	12066.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3714.43	12066.63

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) 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.....	5500.00	10000.00
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	44.39	272.39
(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))	44.39	272.39
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))..	5544.39	10272.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	5544.39	10272.39

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)	3714.43	12066.63
34. Total Contribution Refunds (from Line 28(d))	44.39	272.39
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3670.04	11794.24
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 / 12
	<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)
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 ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2007

Transaction ID: SA11A1.6123

Amount of Each Receipt this Period
 60.00

payroll deduction

B. 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 ▼ 374.46

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2007

Transaction ID: SA11A1.6096

Amount of Each Receipt this Period
 124.82

payroll deduction

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

Mailing Address 11511 Brayton Drive C1

City Anchorage State AK Zip Code 98516

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

Name of Employer Horizon Lines Occupation Director, operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2007

Transaction ID: SA11A1.6150

Amount of Each Receipt this Period
 100.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)	284.82
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 / 12
	<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"/>	<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

Full Name (Last, First, Middle Initial) A. Clifford Farley		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2007	
Mailing Address 3570 Sharatin Road		Transaction ID: SA11A1.6100	
City Kodiak	State AK	Zip Code 99615	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Horizon Lines	Occupation Manager - Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Lori A Galloway		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2007	
Mailing Address P.O. Box 111393		Transaction ID: SA11A1.6135	
City Anchorage	State AK	Zip Code 99511	Amount of Each Receipt this Period 60.00
FEC ID number of contributing federal political committee. C		payroll deduction	
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 ▼ 210.00		

Full Name (Last, First, Middle Initial) C. Rich Kessler		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2007	
Mailing Address 3123 Overlook Circle		Transaction ID: SA11A1.6120	
City Hilland Village	State TX	Zip Code 75077	Amount of Each Receipt this Period 145.87
FEC ID number of contributing federal political committee. C		payroll deduction	
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 ▼ 437.61		

SUBTOTAL of Receipts This Page (optional)	305.87
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 / 12
	<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

Full Name (Last, First, Middle Initial) A. Marv Labrador		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2007	
Mailing Address P.O. Box 8897		Transaction ID: SA11A1.6119	
City State Zip Code Tamuning GU 96931		Amount of Each Receipt this Period 117.70	
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Occupation Horizon Lines General Manager, Country Mgmt			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 406.20	

Full Name (Last, First, Middle Initial) B. Way Way P Pee		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2007	
Mailing Address 1839 Darnell Circle		Transaction ID: SA11A1.6105	
City State Zip Code Frisco TX 00007		Amount of Each Receipt this Period 86.08	
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Occupation Horizon Llnes Manager Applications			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 246.98	

Full Name (Last, First, Middle Initial) C. Charles G. Raymond		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2007	
Mailing Address 9015 Winged Bourne Rd		Transaction ID: SA11A1.6070	
City State Zip Code Charlotte NC 28210		Amount of Each Receipt this Period 512.50	
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Occupation Horizon Lines President & CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1025.00	

SUBTOTAL of Receipts This Page (optional) ▶	716.28
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 / 12
	<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	

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

Full Name (Last, First, Middle Initial) A. Sam Raymond		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2007	
Mailing Address 6143 Cedar Croft Drive		Transaction ID: SA11A1.6079	
City State Zip Code Charlotte NC 28266		Amount of Each Receipt this Period 76.67	
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Occupation Horizon Lines Manager, Performance Monitoring			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.01	

Full Name (Last, First, Middle Initial) B. Domingo Rodriguez		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2007	
Mailing Address PO Box 360945		Transaction ID: SA11A1.6149	
City State Zip Code San Juan PR 00936		Amount of Each Receipt this Period 76.50	
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Occupation Horizon Lines Manager, Finance and Accounting			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 229.50	

Full Name (Last, First, Middle Initial) C. Brian Taylor		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2007	
Mailing Address 150 Kaapuni Drive		Transaction ID: SA11A1.6068	
City State Zip Code Kallua HI 96734		Amount of Each Receipt this Period 211.67	
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Occupation Horizon Lines VP Country Management			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 635.01	

SUBTOTAL of Receipts This Page (optional) ▶	364.84
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 10 / 12
	<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)
Matthew Urbania

Mailing Address 3034 Shillington Pl

City State Zip Code
Charlotte NC 28210

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

Name of Employer Horizon Lines Occupation Vice President & CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 498.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 26 / 2007

Transaction ID: SA11A1.6097

Amount of Each Receipt this Period
166.00

payroll deduction

B. Full Name (Last, First, Middle Initial)
Duncan Wright

Mailing Address 5411 Vanderbilt Avenue

City State Zip Code
Dallas TX 75206

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

Name of Employer Horizon Lines Occupation Manager, Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 26 / 2007

Transaction ID: SA11A1.6090

Amount of Each Receipt this Period
85.00

payroll deduction

C. 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 Y
03 / 26 / 2007

Transaction ID: SA11A1.6075

Amount of Each Receipt this Period
167.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)	418.00
TOTAL This Period (last page this line number only)	2089.81

**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 11 / 12

<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

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

Full Name (Last, First, Middle Initial)

A. ABERCROMBIE FOR CONGRESS

Mailing Address C/O 1357 KAPIOLANI BLVD 31005

City HONOLULU State HI Zip Code 96814

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: HI District: 01

Transaction ID: SB23.6153

Date of Disbursement

03 / 23 / 2007

Amount of Each Disbursement this Period

1000.00

B. DANPAC

Mailing Address 1088 BISHOP STREET SUITE 1009

City HONOLULU State HI Zip Code 96813

Purpose of Disbursement
payroll deduction

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.6110

Date of Disbursement

03 / 28 / 2007

Amount of Each Disbursement this Period

2500.00

C. DEMOCRATIC PARTY OF HAWAII

Mailing Address 1314 S. King Street
#G-4

City Honolulu State HI Zip Code 96814

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.6107

Date of Disbursement

03 / 07 / 2007

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ►

5500.00

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

5500.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 / 12
	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 <input type="text" value="-3770.00"/>	Transaction ID: SD10.4121	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="-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 <input type="text" value="3770.00"/>	Transaction ID: SD10.4120	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3770.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="0.00"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>