

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** 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 02 01 2006 through 02 28 2006

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 10 05 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.

**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 | 2 |

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

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 0 | 2 |

| | |
|---|---|
| D | D |
| 2 | 8 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

| | 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>6</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 6 | | 49230.36 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 6 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 52332.87 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 3860.87 | 7671.74 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 56193.74 | 56902.10 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 0.00 | 708.36 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 56193.74 | 56193.74 | | | | | | | | |
| 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 | 2 |

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

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 0 | 2 |

| | |
|---|---|
| D | D |
| 2 | 8 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

| 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 | 1411.74 | 1617.74 |
| (i) Itemized (use Schedule A) | 2449.13 | 6054.00 |
| (ii) Unitemized | 3860.87 | 7671.74 |
| (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) | 3860.87 | 7671.74 |
| 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)) | 3860.87 | 7671.74 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 3860.87 | 7671.74 |

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..... | 0.00 | 0.00 |
| 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 | 708.36 |
| (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 | 708.36 |
| 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)).. | 0.00 | 708.36 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 0.00 | 708.36 |

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 | 3860.87 | 7671.74 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 708.36 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 3860.87 | 6963.38 |
| 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 / 10 |
| | <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)
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 ▼ 242.36

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: SA11A1.5020

Amount of Each Receipt this Period
121.18

payroll deduction

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

Mailing Address 3123 Overlook Circle

City State Zip Code
Hilland Village TX 75077

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

Name of Employer Occupation
Horizon Services Vice president

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 283.26

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: SA11A1.5051

Amount of Each Receipt this Period
141.63

payroll deduction

C. 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 ▼ 249.98

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 0 6

Transaction ID: SA11A1.5070

Amount of Each Receipt this Period
479.17

payroll deduction

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 741.98 |
| 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 / 10 |
| | <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)
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 Horizon Lines Occupation Manager, Performance Monitoring

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 206.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: SA11A1.5071

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 Horizon Lines Occupation VP Country Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 261.52

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: SA11A1.5082

Amount of Each Receipt this Period
130.76

payroll deduction

C. 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 ▼ 332.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: SA11A1.5085

Amount of Each Receipt this Period
166.00

payroll deduction

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 502.76 |
| 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 8 / 10 | |
| | (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"/> 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)
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 Occupation
Horizon Lines VP Legal

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 334.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: SA11A1.5089

Amount of Each Receipt this Period
167.00

payroll deduction

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 167.00 |
| TOTAL This Period (last page this line number only) | ▶ | 1411.74 |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 9 / 10 |
| | 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"/> |

Image# 27931294081

Form/Schedule: SA11A1 This contributor makes contribuions by payroll deduction. This report and reports in 2004, 2005, and 2006 have been amended to reflect the date of receipt for these contributions as the actual date of payroll deduction, rather than the date of deposit into the committee's bank account. These corrections will not change the aggregate contributions for this contributor. The purpose of these amendments is to ensure that contributions from this contributor will appear in the month in which they actually were deducted from his check.

Transaction ID: SA11A1.5070
