

# 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 11 01 2009 through 11 30 2009

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 12 20 2009

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

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**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:    To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <input type="text" value="2009"/>		78182.87
(b) Cash on Hand at Beginning of Reporting Period .....	68120.99	
(c) Total Receipts (from Line 19) .....	2518.72	31659.88
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	70639.71	109842.75
7. Total Disbursements (from Line 31) .....	3400.00	42603.04
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	67239.71	67239.71
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> 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:    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) .....	2411.72	22798.47
(ii) Unitemized .....	107.00	8861.41
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	2518.72	31659.88
(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) .....	2518.72	31659.88
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)) .....	2518.72	31659.88
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2518.72	31659.88

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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	355.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	355.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3400.00	40900.00
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	10.00
(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	10.00
29. Other Disbursements.....	0.00	1337.23
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))..	3400.00	42603.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3400.00	42603.04

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	2518.72	31659.88
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	10.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2518.72	31649.88
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	355.81
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	355.81

**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 / 20
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael Avara		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 1218 Hillshire Meadow Drive		<b>Transaction ID:</b> SA11AI.8336
	City Matthews	State NC	Zip Code 28105
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
	Name of Employer Horizon Lines, LLC	Occupation Sr VP, Finance & CFO	payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1100.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Charles Battiato		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address P.O. Box 894715		<b>Transaction ID:</b> SA11AI.8360
	City Mililani	State HI	Zip Code 96789
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 51.33
	Name of Employer Horizon Lines	Occupation Manager, Sales	payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 564.63	

<b>C.</b>	Full Name (Last, First, Middle Initial) Henry Bell		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 4701 Preston Park Blvd		<b>Transaction ID:</b> SA11AI.8363
	City Plano	State TX	Zip Code 75093
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
	Name of Employer Horizon Lines	Occupation Financial Analyst Manager	payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>201.33</b>
<b>TOTAL</b> 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 7 / 20
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas M Bellerud	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 3607 22nd St SE	<b>Transaction ID:</b> SA11AI.8358
	City Puyallup State WA Zip Code 98374	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction monthly
	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 440.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mark Blankenship	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 3247 Windbluff Drive	<b>Transaction ID:</b> SA11AI.8338
	City Charlotte State NC Zip Code 28277	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction monthly
	Name of Employer Horizon Lines Occupation VP, Controller Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 600.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Alfred Bozzuffi	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 159 Bergen Street	<b>Transaction ID:</b> SA11AI.8328
	City Brooklyn State NY Zip Code 11217	Amount of Each Receipt this Period 42.02
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction monthly
	Name of Employer Horizon Lines Occupation Naval Architect Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 435.20	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>157.02</b>
<b>TOTAL</b> 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 / 20
	<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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Horizon Lines, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeff Brennan		Date of Receipt MM / DD / YYYY 11 / 29 / 2009
	Mailing Address 47-432 Waihee Rd		<b>Transaction ID:</b> SA11AI.8357
	City Kaneohe	State HI	Zip Code 96744-4951
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
	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 ▼ 480.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Marvin Buchanan		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 6012 E Mercer Way		<b>Transaction ID:</b> SA11AI.8344
	City Mercer Island	State WA	Zip Code 98040
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 145.00
	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 ▼ 1583.53	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kenneth K Chu		Date of Receipt MM / DD / YYYY 11 / 29 / 2009
	Mailing Address 1604 Woodcutter Court		<b>Transaction ID:</b> SA11AI.8366
	City Anchorage	State AK	Zip Code 99507
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
	Name of Employer Horizon Lines	Occupation SHift Manager	payroll deduction weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	220.00
<b>TOTAL</b> 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 / 20
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Erica Compton		Date of Receipt MM / DD / YYYY 11 / 30 / 2009		
	Mailing Address 4838 Gurley Ave		<b>Transaction ID:</b> SA11AI.8350		
	City Dallas	State TX	Zip Code 75223	Amount of Each Receipt this Period 70.20	
	FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction monthly		
	Name of Employer Horizon Lines	Occupation Manager, Collections	Aggregate Year-to-Date 772.20		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Marion G. Davis		Date of Receipt MM / DD / YYYY 11 / 29 / 2009		
	Mailing Address 11511 Brayton Drive C1		<b>Transaction ID:</b> SA11AI.8371		
	City Anchorage	State AK	Zip Code 98516	Amount of Each Receipt this Period 125.00	
	FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction weekly		
	Name of Employer Horizon Lines	Occupation Director, operations	Aggregate Year-to-Date 1100.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Dan Downes		Date of Receipt MM / DD / YYYY 11 / 30 / 2009		
	Mailing Address 12956 Se 301st St		<b>Transaction ID:</b> SA11AI.8362		
	City Auburn	State WA	Zip Code 98092	Amount of Each Receipt this Period 54.67	
	FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction monthly		
	Name of Employer Horizon Lines	Occupation Director, Marketing	Aggregate Year-to-Date 601.37		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>249.87</b>
<b>TOTAL</b> 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 / 20
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Dwayne Fujitani		Date of Receipt MM / DD / YYYY 11 / 29 / 2009		
	Mailing Address 1818a Aupuni St		<b>Transaction ID:</b> SA11AI.8370		
	City Honolulu	State HI	Zip Code 96817	Amount of Each Receipt this Period 36.05	
	FEC ID number of contributing federal political committee. <b>C</b>		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 ▼ 341.04			

<b>B.</b>	Full Name (Last, First, Middle Initial) Lori A Galloway		Date of Receipt MM / DD / YYYY 11 / 29 / 2009		
	Mailing Address P.O. Box 111393		<b>Transaction ID:</b> SA11AI.8365		
	City Anchorage	State AK	Zip Code 99511	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. <b>C</b>		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 ▼ 720.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) James Garrahan		Date of Receipt MM / DD / YYYY 11 / 30 / 2009		
	Mailing Address 73 Paseo De Orguideas		<b>Transaction ID:</b> SA11AI.8327		
	City Trujillo Alto	State PR	Zip Code 00976	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction monthly		
Name of Employer Horizon Lines		Occupation Manager, Sales			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>161.05</b>
<b>TOTAL</b> 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 / 20
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Kenneth Gill		Date of Receipt MM / DD / YYYY 11 / 29 / 2009
	Mailing Address 2911 Leeward Place		<b>Transaction ID:</b> SA11AI.8320
	City Anchorage	State AK	Zip Code 99516
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
	Name of Employer Horizon Lines	Occupation Manager, Business Processes	payroll deduction weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Claudette Hilbun		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 1413 Swallow Circle		<b>Transaction ID:</b> SA11AI.8342
	City Lewisville	State TX	Zip Code 75077
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
	Name of Employer Horizon lines	Occupation Director, Finance and Accounting	payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 330.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Gunther Hoock		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 7804 Clark Springs Drive		<b>Transaction ID:</b> SA11AI.8341
	City Plano	State TX	Zip Code 75025
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
	Name of Employer Horizon Lines	Occupation Director, Safety & Security	payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	100.00
<b>TOTAL</b> 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 / 20
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Paul F Hydock		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 5890 Tarta Tropicana Condo		<b>Transaction ID:</b> SA11AI.8335
	City Carolina	State PR	Zip Code 00979
	FEC ID number of contributing federal political committee. <b>C</b>		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 ▼ 384.56	

<b>B.</b>	Full Name (Last, First, Middle Initial) Sabrina M Jackson		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 3106 Indian Trail Ct		<b>Transaction ID:</b> SA11AI.8343
	City Rowlett	State TX	Zip Code 75088
	FEC ID number of contributing federal political committee. <b>C</b>		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 ▼ 623.15	

<b>C.</b>	Full Name (Last, First, Middle Initial) Lana I Kanaha		Date of Receipt MM / DD / YYYY 11 / 29 / 2009
	Mailing Address 837 Kealahou St		<b>Transaction ID:</b> SA11AI.8367
	City Honolulu	State HI	Zip Code 96825
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
	Name of Employer Horizon Lines	Occupation Supervisor, Port operations	payroll deduction weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>116.61</b>
<b>TOTAL</b> 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 13 / 20
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Rich Kessler	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 3123 Overlook Circle	<b>Transaction ID:</b> SA11AI.8354
	City Hilland Village State TX Zip Code 75077	Amount of Each Receipt this Period 157.76
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction weekly
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 ▼ 1735.46	

<b>B.</b>	Full Name (Last, First, Middle Initial) Marv Labrador	Date of Receipt MM / DD / YYYY 11 / 29 / 2009
	Mailing Address P.O. Box 8897	<b>Transaction ID:</b> SA11AI.8353
	City Tamuning State GU Zip Code 96931	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. <b>C</b>	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 ▼ 1440.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert Loya	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 6809 E. Wardlow Road	<b>Transaction ID:</b> SA11AI.8361
	City Long Beach State CA Zip Code 90808	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction monthly
Name of Employer Horizon Lines Occupation Manager, Terminal Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>327.76</b>
<b>TOTAL</b> 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 / 20
	<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

<b>A.</b>	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 1 1 / 3 0 / 2 0 0 9
	City	State	Zip Code
	Copell	TX	75019
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8356
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 ▼ 400.95	<input type="text"/> 36.45
			payroll deduction monthly

<b>B.</b>	Full Name (Last, First, Middle Initial) Anita M. Olson		Date of Receipt
	Mailing Address 1724 Tawakoni Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 3 0 / 2 0 0 9
	City	State	Zip Code
	Plano	TX	75075
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8349
Name of Employer Horizon Lines		Occupation Manager, operations	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 ▼ 270.00	<input type="text"/> 25.00
			payroll deduction monthly

<b>C.</b>	Full Name (Last, First, Middle Initial) Anthony Pagud		Date of Receipt
	Mailing Address 95-359 Lonomea Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 2 9 / 2 0 0 9
	City	State	Zip Code
	Mililani	HI	96789
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8368
Name of Employer Horizon Lines		Occupation Container Yard/Auto Supervisor	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 ▼ 205.95	<input type="text"/> 21.45
			payroll deduction weekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 82.90
<b>TOTAL</b> 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 15 / 20
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Huei-Ning P 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 Y
	City	State	Zip Code
	Frisco	TX	00007
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8348
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 ▼	<input type="text"/> 89.52
			payroll deduction monthly

<b>B.</b>	Full Name (Last, First, Middle Initial) Steve Powers		Date of Receipt
	Mailing Address 1805 Red Rock Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	McKinney	TX	75075
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8340
Name of Employer Horizon Lines		Occupation Manager, Equipment	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 ▼	<input type="text"/> 20.00
			payroll deduction monthly

<b>C.</b>	Full Name (Last, First, Middle Initial) John J Quan		Date of Receipt
	Mailing Address 703 Lindsey Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Winfield	IL	06019
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8345
Name of Employer Horizon Lines		Occupation General manager, sales	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 ▼	<input type="text"/> 20.00
			payroll deduction monthly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 129.52
<b>TOTAL</b> 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 16 / 20
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Sam Raymond	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 6143 Cedar Croft Drive	<b>Transaction ID:</b> SA11AI.8331
	City State Zip Code Charlotte NC 28266	Amount of Each Receipt this Period 85.83
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction monthly
Name of Employer Horizon Lines	Occupation Manager, Performance Monitoring	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 944.13	

<b>B.</b>	Full Name (Last, First, Middle Initial) Dave Rodger	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 149 Blauvelt Ave	<b>Transaction ID:</b> SA11AI.8332
	City State Zip Code Ho Ho Kus NJ 07423	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction monthly
Name of Employer Horizon Lines	Occupation Director, Technical Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jose Rodriguez	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address Alturas de Torrimar	<b>Transaction ID:</b> SA11AI.8347
	City State Zip Code San Juan PR 00969	Amount of Each Receipt this Period 68.75
	FEC ID number of contributing federal political committee. <b>C</b>	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 ▼ 744.15	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>196.58</b>
<b>TOTAL</b> 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 17 / 20
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Frank Roznerski		Date of Receipt MM / DD / YYYY 11 / 29 / 2009
	Mailing Address 95-40 HaaloHi St		<b>Transaction ID:</b> SA11AI.8369
	City Mililani	State HI	Zip Code 06789
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
	Name of Employer Horizon Lines	Occupation Safety Manager	payroll deduction weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Claudia Stone		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 3 Atwood Avenue		<b>Transaction ID:</b> SA11AI.8334
	City Pompton Plains	State NJ	Zip Code 07444
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 60.00
	Name of Employer Horizon Lines	Occupation Assistant General Counsel	payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 660.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Brian Taylor		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 150 Kaapuni Drive		<b>Transaction ID:</b> SA11AI.8364
	City Kallua	State HI	Zip Code 96734
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
	Name of Employer Horizon Lines	Occupation VP Country Management	payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	135.00
<b>TOTAL</b> 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 18 / 20
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Duncan Wright		Date of Receipt MM / DD / YYYY 11 / 30 / 2009		
	Mailing Address 5411 Vanderbilt Avenue		<b>Transaction ID:</b> SA11AI.8339		
	City Dallas	State TX	Zip Code 75206	Amount of Each Receipt this Period 52.50	
	FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction monthly		
	Name of Employer Horizon Lines	Occupation Manager, Marketing	Aggregate Year-to-Date 558.10		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael, Zendan		Date of Receipt MM / DD / YYYY 11 / 30 / 2009		
	Mailing Address 943 Longfield Circle		<b>Transaction ID:</b> SA11AI.8324		
	City Charlotte	State NC	Zip Code 28270	Amount of Each Receipt this Period 114.58	
	FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction monthly		
	Name of Employer Horizon Lines	Occupation VP, Deputy General Counsel	Aggregate Year-to-Date 343.74		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert Zuckerman		Date of Receipt MM / DD / YYYY 11 / 30 / 2009		
	Mailing Address 19233 Hidden Cove Lane		<b>Transaction ID:</b> SA11AI.8326		
	City Cornelius	State NC	Zip Code 28031	Amount of Each Receipt this Period 167.00	
	FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction monthly		
	Name of Employer Horizon Lines	Occupation VP Legal	Aggregate Year-to-Date 1837.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>334.08</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>2411.72</b>

**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 19 / 20

<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

<b>A.</b> Full Name (Last, First, Middle Initial) LEAHY FOR U.S. SENATOR COMMITTEE <hr/> Mailing Address PO BOX 1042 <hr/> City MONTPELIER State VT Zip Code 05601 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8317 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 2400.00
<b>B.</b> Full Name (Last, First, Middle Initial) SUE MYRICK FOR CONGRESS <hr/> Mailing Address P.O. Box 37091 <hr/> City Charlotte State NC Zip Code 28237 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> Category/Type <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8319 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

3400.00

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

3400.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 20 / 20
	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

<b>A.</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	<b>Transaction ID: SD10.4121</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period -3770.00

<b>B.</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	<b>Transaction ID: SD10.4120</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3770.00

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