

# 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) 2001 K Street, NW

Suite 400

Check if different than previously reported. (ACC) WASHINGTON DC 20006

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 2011 through 03 31 2011

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 19 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							
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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	3

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		63275.67
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	64036.00									
(c) Total Receipts (from Line 19) .....	1979.34	7315.55								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	66015.34	70591.22								
7. Total Disbursements (from Line 31) .....	4000.00	8575.88								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	62015.34	62015.34								
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: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

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) .....	1010.41	2247.48
(ii) Unitemized .....	968.93	4138.21
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	1979.34	6385.69
(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) .....	1979.34	6385.69
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	37.94
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	891.92
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)) .....	1979.34	7315.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1979.34	7315.55

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	75.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	75.88
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	4000.00	8500.00
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))..	4000.00	8575.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4000.00	8575.88

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) .....	1979.34	6385.69
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1979.34	6385.69
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	75.88
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	37.94
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	37.94

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 14  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
Michael Avara

Mailing Address 1218 Hillshire Meadow Drive

City State Zip Code  
Matthews NC 28105

FEC ID number of contributing federal political committee. C

Name of Employer: Horizon Lines, LLC   Occupation: Sr VP, Finance & CFO

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY  
03 / 24 / 2011

**Transaction ID:** SA11AI.9296

Amount of Each Receipt this Period 100.00

Contribution

**B.** 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: Horizon Lines   Occupation: Director, Marketing

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 441.24

Date of Receipt MM / DD / YYYY  
03 / 24 / 2011

**Transaction ID:** SA11AI.9321

Amount of Each Receipt this Period 147.08

contribution

**C.** 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: Horizon Lines   Occupation: Manager, Collections

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 210.60

Date of Receipt MM / DD / YYYY  
03 / 24 / 2011

**Transaction ID:** SA11AI.9326

Amount of Each Receipt this Period 70.20

contribution

**SUBTOTAL** of Receipts This Page (optional) ..... 317.28

**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 7 / 14
	<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) Marion G. Davis		Date of Receipt
	Mailing Address 11511 Brayton Drive C1		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 03 / 03 / 2011
	City	State	Zip Code
	Anchorage	AK	98516
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.9264
Name of Employer Horizon Lines		Occupation Director, 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 ▼	<input type="text"/> 25.00
		<input type="text"/> 225.00	Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Marion G. Davis		Date of Receipt
	Mailing Address 11511 Brayton Drive C1		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 03 / 10 / 2011
	City	State	Zip Code
	Anchorage	AK	98516
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.9270
Name of Employer Horizon Lines		Occupation Director, 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 ▼	<input type="text"/> 25.00
		<input type="text"/> 250.00	Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Marion G. Davis		Date of Receipt
	Mailing Address 11511 Brayton Drive C1		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 03 / 17 / 2011
	City	State	Zip Code
	Anchorage	AK	98516
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.9279
Name of Employer Horizon Lines		Occupation Director, 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 ▼	<input type="text"/> 25.00
		<input type="text"/> 275.00	Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 75.00
<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 8 / 14
	<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) Marion G. Davis		Date of Receipt
	Mailing Address 11511 Brayton Drive C1		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 24 / 2011
	City	State	Zip Code
	Anchorage	AK	98516
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.9288
Name of Employer Horizon Lines		Occupation Director, 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 ▼ <input type="text"/> 300.00	<input type="text"/> 25.00
			Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Marion G. Davis		Date of Receipt
	Mailing Address 11511 Brayton Drive C1		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 31 / 2011
	City	State	Zip Code
	Anchorage	AK	98516
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.9302
Name of Employer Horizon Lines		Occupation Director, 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 ▼ <input type="text"/> 325.00	<input type="text"/> 25.00
			Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Marv Labrador		Date of Receipt
	Mailing Address P.O. Box 8897		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 03 / 2011
	City	State	Zip Code
	Tamuning	GU	96931
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.9261
Name of Employer Horizon Lines		Occupation General Manager, Country Mgmt	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"/> 290.79	<input type="text"/> 32.31
			Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 82.31
<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: PAGE 9 / 14  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
Marv Labrador

Mailing Address P.O. Box 8897

City State Zip Code  
Tamuning GU 96931

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Horizon Lines General Manager, Country Mgmt

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 323.10

Date of Receipt 03 / 10 / 2011  
**Transaction ID:** SA11AI.9275

Amount of Each Receipt this Period 32.31

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Marv Labrador

Mailing Address P.O. Box 8897

City State Zip Code  
Tamuning GU 96931

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Horizon Lines General Manager, Country Mgmt

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 355.41

Date of Receipt 03 / 17 / 2011  
**Transaction ID:** SA11AI.9284

Amount of Each Receipt this Period 32.31

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Marv Labrador

Mailing Address P.O. Box 8897

City State Zip Code  
Tamuning GU 96931

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Horizon Lines General Manager, Country Mgmt

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 387.72

Date of Receipt 03 / 24 / 2011  
**Transaction ID:** SA11AI.9293

Amount of Each Receipt this Period 32.31

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... 96.93

**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: PAGE 10 / 14

(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)

Marv Labrador

Mailing Address P.O. Box 8897

City State Zip Code  
Tamuning GU 96931

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

Name of Employer Occupation  
Horizon Lines General Manager, Country Mgmt

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 420.03

Date of Receipt

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

Transaction ID: SA11AI.9303

Amount of Each Receipt this Period

32.31

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Leslie Peters

Mailing Address 21 Shippen Court

City State Zip Code  
Flemington NJ 08822

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

Name of Employer Occupation  
Horizon Lines Regional Sales, International

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 1 1

Transaction ID: SA11AI.9299

Amount of Each Receipt this Period

125.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Michael, Zendan

Mailing Address 943 Longfield Circle

City State Zip Code  
Charlotte NC 28270

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

Name of Employer Occupation  
Horizon Lines VP, Deputy General Counsel

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 343.74

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 1 1

Transaction ID: SA11AI.9300

Amount of Each Receipt this Period

114.58

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

271.89

**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:		PAGE 11 / 14	
	(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

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert Zuckerman		Date of Receipt
	Mailing Address 19233 Hidden Cove Lane		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2011"/>
	City Cornelius	State NC	Zip Code 28031
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID:</b> SA11AI.9314
	Name of Employer Horizon Lines		Occupation VP Legal
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="501.00"/>	Amount of Each Receipt this Period <input type="text" value="167.00"/> contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="167.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="1010.41"/>



**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 13 / 14

<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)

MICA FOR CONGRESS

Mailing Address P. O. Box 181546

City State Zip Code  
Casselberry FL 32718

Purpose of Disbursement  
contribution

Candidate Name  
JOHN L. MR. MICA

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: FL District: 07

Transaction ID: SB23.9346

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 14 / 14
	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. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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