

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 checked="" type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input 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 10 01 2009 through 10 31 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 11 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.

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: 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	68101.95	
(c) Total Receipts (from Line 19)	2706.65	29141.16
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	70808.60	107324.03
7. Total Disbursements (from Line 31)	2687.61	39203.04
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	68120.99	68120.99
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: 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)	2448.20	20386.75
(ii) Unitemized	258.45	8754.41
(iii) TOTAL (add Lines 11(a)(i) and (ii)	2706.65	29141.16
(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)	2706.65	29141.16
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))	2706.65	29141.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2706.65	29141.16

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	187.61	355.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	187.61	355.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	37500.00
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))..	2687.61	39203.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2687.61	39203.04

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	2706.65	29141.16
34. Total Contribution Refunds (from Line 28(d))	0.00	10.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2706.65	29131.16
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	187.61	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)	187.61	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

A.	Full Name (Last, First, Middle Initial) Michael Avara	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 1218 Hillshire Meadow Drive	Transaction ID: SA11AI.8277
	City State Zip Code Matthews NC 28105	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	payroll deduction monthly
Name of Employer Horizon Lines, LLC	Occupation Sr VP, Finance & CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Charles Battiato	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address P.O. Box 894715	Transaction ID: SA11AI.8302
	City State Zip Code Mililani HI 96789	Amount of Each Receipt this Period 51.33
	FEC ID number of contributing federal political committee. C	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 ▼ 513.30	

C.	Full Name (Last, First, Middle Initial) Henry Bell	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 4701 Preston Park Blvd	Transaction ID: SA11AI.8305
	City State Zip Code Plano TX 75093	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	payroll deduction monthly
Name of Employer Horizon Lines	Occupation Financial Analyst Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	201.33
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 / 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

A.	Full Name (Last, First, Middle Initial) Thomas M Bellerud		Date of Receipt MM / DD / YYYY 10 / 26 / 2009		
	Mailing Address 3607 22nd St SE		Transaction ID: SA11AI.8300		
	City Puyallup	State WA	Zip Code 98374	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C		payroll deduction monthly		
	Name of Employer Horizon Lines	Occupation Outside Sales	Aggregate Year-to-Date ▼ 400.00		

B.	Full Name (Last, First, Middle Initial) Mark Blankenship		Date of Receipt MM / DD / YYYY 10 / 26 / 2009		
	Mailing Address 3247 Windbluff Drive		Transaction ID: SA11AI.8280		
	City Charlotte	State NC	Zip Code 28277	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C		payroll deduction monthly		
	Name of Employer Horizon Lines	Occupation VP, Controller	Aggregate Year-to-Date ▼ 525.00		

C.	Full Name (Last, First, Middle Initial) Alfred Bozzuffi		Date of Receipt MM / DD / YYYY 10 / 26 / 2009		
	Mailing Address 159 Bergen Street		Transaction ID: SA11AI.8270		
	City Brooklyn	State NY	Zip Code 11217	Amount of Each Receipt this Period 42.02	
	FEC ID number of contributing federal political committee. C		payroll deduction monthly		
	Name of Employer Horizon Lines	Occupation Naval Architect	Aggregate Year-to-Date ▼ 393.18		

SUBTOTAL of Receipts This Page (optional)	157.02
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 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

A.	Full Name (Last, First, Middle Initial) Jeff Brennan		Date of Receipt
	Mailing Address 47-432 Waihee Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 9 / 2 0 0 9
	City	State	Zip Code
	Kaneohe	HI	96744-4951
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8299
Name of Employer Horizon Lines		Occupation Manager, Port 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 ▼ 430.00	<input type="text"/> 50.00
			payroll deduction weekly

B.	Full Name (Last, First, Middle Initial) Marvin Buchanan		Date of Receipt
	Mailing Address 6012 E Mercer Way		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 6 / 2 0 0 9
	City	State	Zip Code
	Mercer Island	WA	98040
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8286
Name of Employer Horizon Lines		Occupation Director, Marketing	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 ▼ 1438.53	<input type="text"/> 145.00
			payroll deduction monthly

C.	Full Name (Last, First, Middle Initial) Kenneth K Chu		Date of Receipt
	Mailing Address 1604 Woodcutter Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 9 / 2 0 0 9
	City	State	Zip Code
	Anchorage	AK	99507
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8308
Name of Employer Horizon Lines		Occupation SHift Manager	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 ▼ 215.00	<input type="text"/> 25.00
			payroll deduction weekly

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 220.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 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

A.

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

Mailing Address 4838 Gurley Ave

City State Zip Code
Dallas TX 75223

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

Name of Employer Occupation
Horizon Lines Manager, Collections

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
702.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.8293

Amount of Each Receipt this Period
70.20

payroll deduction monthly

B.

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

Mailing Address 11511 Brayton Drive C1

City State Zip Code
Anchorage AK 98516

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

Name of Employer Occupation
Horizon Lines Director, operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
975.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.8313

Amount of Each Receipt this Period
125.00

payroll deduction weekly

C.

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

Mailing Address 12956 Se 301st St

City State Zip Code
Auburn WA 98092

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

Name of Employer Occupation
Horizon Lines Director, Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
546.70

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.8304

Amount of Each Receipt this Period
54.67

payroll deduction monthly

SUBTOTAL of Receipts This Page (optional) ► **249.87**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 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

A.	Full Name (Last, First, Middle Initial) Dwayne Fujitani	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 1818a Aupuni St	Transaction ID: SA11AI.8312
	City Honolulu State HI Zip Code 96817	Amount of Each Receipt this Period 36.05
	FEC ID number of contributing federal political committee. C	payroll deduction weekly
	Name of Employer Horizon Lines Occupation Manager, Port Operations	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 304.99

B.	Full Name (Last, First, Middle Initial) Lori A Galloway	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address P.O. Box 111393	Transaction ID: SA11AI.8307
	City Anchorage State AK Zip Code 99511	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	payroll deduction weekly
	Name of Employer Horizon Lines Occupation Manager, Port Operations	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 645.00

C.	Full Name (Last, First, Middle Initial) James Garrahan	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 73 Paseo De Orguideas	Transaction ID: SA11AI.8269
	City Trujillo Alto State PR Zip Code 00976	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	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 ▼ 500.00

SUBTOTAL of Receipts This Page (optional)	161.05
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 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

A.	Full Name (Last, First, Middle Initial) Claudette Hilbun	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 1413 Swallow Circle	Transaction ID: SA11AI.8284
	City State Zip Code Lewisville TX 75077	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	payroll deduction monthly
Name of Employer Horizon lines	Occupation Director, Finance and Accounting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Paul F Hydock	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 5890 Tarta Tropicana Condo	Transaction ID: SA11AI.8276
	City State Zip Code Carolina PR 00979	Amount of Each Receipt this Period 34.96
	FEC ID number of contributing federal political committee. C	payroll deduction monthly
Name of Employer Horizon Lines	Occupation Director, Agency and Logistics	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 349.60	

C.	Full Name (Last, First, Middle Initial) Sabrina M Jackson	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 3106 Indian Trail Ct	Transaction ID: SA11AI.8285
	City State Zip Code Rowlett TX 75088	Amount of Each Receipt this Period 56.65
	FEC ID number of contributing federal political committee. C	payroll deduction monthly
Name of Employer Horizon Lines	Occupation OTC Documenting and Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 566.50	

SUBTOTAL of Receipts This Page (optional)	121.61
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 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

A.	Full Name (Last, First, Middle Initial) Lana I Kanaha	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 837 Kealahou St	Transaction ID: SA11AI.8309
	City Honolulu State HI Zip Code 96825	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	payroll deduction weekly
Name of Employer Horizon Lines	Occupation Supervisor, Port operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

B.	Full Name (Last, First, Middle Initial) Rich Kessler	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 3123 Overlook Circle	Transaction ID: SA11AI.8297
	City Hilland Village State TX Zip Code 75077	Amount of Each Receipt this Period 157.76
	FEC ID number of contributing federal political committee. C	payroll deduction monthly
Name of Employer Horizon Services	Occupation Vice president	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1577.70	

C.	Full Name (Last, First, Middle Initial) Marv Labrador	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address P.O. Box 8897	Transaction ID: SA11AI.8296
	City Tamuning State GU Zip Code 96931	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	payroll deduction weekly
Name of Employer Horizon Lines	Occupation General Manager, Country Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1290.00	

SUBTOTAL of Receipts This Page (optional)	332.76
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 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

A.	Full Name (Last, First, Middle Initial) Linda L Montgomery		Date of Receipt
	Mailing Address 157 Simmons Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Copell	TX	75019
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Horizon Lines		Occupation Manager, Outbound Documentation	Transaction ID: SA11AI.8298
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 364.50	<input type="text"/> 36.45
			payroll deduction monthly

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 Y
	City	State	Zip Code
	Plano	TX	75075
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Horizon Lines		Occupation Manager, operations	Transaction ID: SA11AI.8292
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 245.00	<input type="text"/> 25.00
			payroll deduction monthly

C.	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.		<input type="text"/> C <input type="text"/>
Name of Employer Horizon Lines		Occupation Manager Applications	Transaction ID: SA11AI.8291
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 895.20	<input type="text"/> 89.52
			payroll deduction monthly

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 150.97
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 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	

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

A.	Full Name (Last, First, Middle Initial) Charles G. Raymond	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 9015 Winged Bourne Rd	Transaction ID: SA11AI.8264
	City State Zip Code Charlotte NC 28210	Amount of Each Receipt this Period 200.03
	FEC ID number of contributing federal political committee. C	payroll deduction monthly
Name of Employer Horizon Lines	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Sam Raymond	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 6143 Cedar Croft Drive	Transaction ID: SA11AI.8272
	City State Zip Code Charlotte NC 28266	Amount of Each Receipt this Period 85.83
	FEC ID number of contributing federal political committee. C	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 ▼ 858.30	

C.	Full Name (Last, First, Middle Initial) Dave Rodger	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 149 Blauvelt Ave	Transaction ID: SA11AI.8273
	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. C	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 ▼ 420.00	

SUBTOTAL of Receipts This Page (optional)	327.86
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 / 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

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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) Jose Rodriguez		Date of Receipt MM / DD / YYYY 10 / 26 / 2009		
	Mailing Address Alturas de Torrimar		Transaction ID: SA11AI.8290		
	City San Juan	State PR	Zip Code 00969	Amount of Each Receipt this Period 66.65	
	FEC ID number of contributing federal political committee. C		payroll deduction monthly		
	Name of Employer Horizon Lines	Occupation General Manager, Sales	Aggregate Year-to-Date 675.40		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Frank Roznerski		Date of Receipt MM / DD / YYYY 10 / 29 / 2009		
	Mailing Address 95-40 Haalohi St		Transaction ID: SA11AI.8311		
	City Mililani	State HI	Zip Code 06789	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C		payroll deduction weekly		
	Name of Employer Horizon Lines	Occupation Safety Manager	Aggregate Year-to-Date 215.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Claudia Stone		Date of Receipt MM / DD / YYYY 10 / 26 / 2009		
	Mailing Address 3 Atwood Avenue		Transaction ID: SA11AI.8275		
	City Pompton Plains	State NJ	Zip Code 07444	Amount of Each Receipt this Period 60.00	
	FEC ID number of contributing federal political committee. C		payroll deduction monthly		
	Name of Employer Horizon Lines	Occupation Assistant General Counsel	Aggregate Year-to-Date 600.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	141.65
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 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

A.	Full Name (Last, First, Middle Initial) Brian Taylor		Date of Receipt
	Mailing Address 150 Kaapuni Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Kallua	HI	96734
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8306
Name of Employer Horizon Lines		Occupation VP Country Management	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 ▼ 500.00	<input type="text"/> 50.00
			payroll deduction monthly

B.	Full Name (Last, First, Middle Initial) Duncan Wright		Date of Receipt
	Mailing Address 5411 Vanderbilt Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Dallas	TX	75206
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8281
Name of Employer Horizon Lines		Occupation Manager, Marketing	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 ▼ 505.60	<input type="text"/> 52.50
			payroll deduction monthly

C.	Full Name (Last, First, Middle Initial) Michael, Zendan		Date of Receipt
	Mailing Address 943 Longfield Circle		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Charlotte	NC	28270
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8266
Name of Employer Horizon Lines		Occupation VP, Deputy General Counsel	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 ▼ 229.16	<input type="text"/> 114.58
			payroll deduction monthly

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 217.08
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 17 / 20	
	(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		Date of Receipt																					
	Mailing Address 19233 Hidden Cove Lane		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	6		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		2	6		2	0	0	9														
	City	State	Zip Code		Transaction ID: SA11AI.8268																			
	Cornelius	NC	28031																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer Horizon Lines		Occupation VP Legal		<input type="text" value="167.00"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1670.00"/>		payroll deduction monthly																				

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="167.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2448.20"/>

**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 18 / 20

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 101 South Tryon Street

City State Zip Code
Charlotte NC 28255

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB21B.8261

Date of Disbursement

10 / 15 / 2009

Amount of Each Disbursement this Period

187.61

SUBTOTAL of Disbursements This Page (optional)

187.61

TOTAL This Period (last page this line number only)

187.61

**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

A. Full Name (Last, First, Middle Initial)
MIKULSKI FOR SENATE COMMITTEE

Mailing Address P O B 13147

City State Zip Code
BALTIMORE MD 21203

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: MD District: 00

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.8259

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 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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor BSY Associates	Nature of Debt (Purpose): design, production of printed materials
Mailing Address 195 Fairfield Ave. Suite 4D	
City State ZIP Code West Caldwell NJ 07006	

Outstanding Balance Beginning This Period -3770.00	Transaction ID: SD10.4121	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period -3770.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor BSY Associates	Nature of Debt (Purpose): design, production of printed materials
Mailing Address 195 Fairfield Ave. Suite 4D	
City State ZIP Code West Caldwell NJ 07006	

Outstanding Balance Beginning This Period 3770.00	Transaction ID: SD10.4120	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3770.00

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