

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 05 01 2009 through 05 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 06 19 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 **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	5

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		78182.87
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	69474.18									
(c) Total Receipts (from Line 19)	2870.09	14820.55								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	72344.27	93003.42								
7. Total Disbursements (from Line 31)	7178.92	27838.07								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	65165.35	65165.35								
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	2240.66	7822.94
(i) Itemized (use Schedule A)		
(ii) Unitemized	629.43	6997.61
(iii) TOTAL (add Lines 11(a)(i) and (ii)	2870.09	14820.55
(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)	2870.09	14820.55
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))	2870.09	14820.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2870.09	14820.55

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	27000.00
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.....	178.92	828.07
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))..	7178.92	27838.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7178.92	27838.07

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	2870.09	14820.55
34. Total Contribution Refunds (from Line 28(d))	0.00	10.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2870.09	14810.55
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 17
	<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)
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 ▼ 500.00

Date of Receipt: 05 / 29 / 2009
Transaction ID: SA11AI.7979
Amount of Each Receipt this Period: 100.00
payroll deduction monthly

B. Full Name (Last, First, Middle Initial)
Charles Battiatto

Mailing Address P.O. Box 894715

City State Zip Code
Mililani HI 96789

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

Name of Employer: Horizon Lines Occupation: Manager, Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 256.65

Date of Receipt: 05 / 29 / 2009
Transaction ID: SA11AI.8004
Amount of Each Receipt this Period: 51.33
payroll deduction monthly

C. Full Name (Last, First, Middle Initial)
Henry Bell

Mailing Address 4701 Preston Park Blvd

City State Zip Code
Plano TX 75093

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

Name of Employer: Horizon Lines Occupation: Financial Analyst Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 29 / 2009
Transaction ID: SA11AI.8007
Amount of Each Receipt this Period: 50.00
payroll deduction monthly

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 / 17
	<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 MM / DD / YYYY 05 / 28 / 2009
	Mailing Address 47-432 Waihee Rd	Transaction ID: SA11AI.8001
	City Kaneohe State HI Zip Code 96744-4951	Amount of Each Receipt this Period 40.00
	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 ▼ 210.00	

B.	Full Name (Last, First, Middle Initial) Marvin Buchanan	Date of Receipt MM / DD / YYYY 05 / 29 / 2009
	Mailing Address 6012 E Mercer Way	Transaction ID: SA11AI.7989
	City Mercer Island State WA Zip Code 98040	Amount of Each Receipt this Period 145.00
	FEC ID number of contributing federal political committee. C	payroll deduction monthly
Name of Employer Horizon Lines	Occupation Director, Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 713.53	

C.	Full Name (Last, First, Middle Initial) Erica Compton	Date of Receipt MM / DD / YYYY 05 / 29 / 2009
	Mailing Address 4838 Gurley Ave	Transaction ID: SA11AI.7995
	City Dallas State TX Zip Code 75223	Amount of Each Receipt this Period 70.20
	FEC ID number of contributing federal political committee. C	payroll deduction monthly
Name of Employer Horizon Lines	Occupation Manager, Collections	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00	

SUBTOTAL of Receipts This Page (optional)	255.20
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 / 17
	<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) Marion G. Davis		Date of Receipt MM / DD / YYYY 05 / 28 / 2009
	Mailing Address 11511 Brayton Drive C1		Transaction ID: SA11AI.8017
	City Anchorage	State AK	Zip Code 98516
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Horizon Lines Occupation Director, operations		payroll deduction weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 525.00	

B.	Full Name (Last, First, Middle Initial) Dan Downes		Date of Receipt MM / DD / YYYY 05 / 29 / 2009
	Mailing Address 12956 Se 301st St		Transaction ID: SA11AI.8006
	City Auburn	State WA	Zip Code 98092
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 54.67
	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 ▼ 273.35	

C.	Full Name (Last, First, Middle Initial) Lori A Galloway		Date of Receipt MM / DD / YYYY 05 / 28 / 2009
	Mailing Address P.O. Box 111393		Transaction ID: SA11AI.8011
	City Anchorage	State AK	Zip Code 99511
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
	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 ▼ 315.00	

SUBTOTAL of Receipts This Page (optional)	▶	214.67
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 9 / 17
	<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) James Garrahan	Date of Receipt MM / DD / YYYY 05 / 28 / 2009
	Mailing Address 73 Paseo De Orguideas	Transaction ID: SA11AI.7971
	City State Zip Code Trujillo Alto PR 00976	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	payroll deduction weekly
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 ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Sabrina M Jackson	Date of Receipt MM / DD / YYYY 05 / 29 / 2009
	Mailing Address 3106 Indian Trail Ct	Transaction ID: SA11AI.7988
	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 ▼ 283.25	

C.	Full Name (Last, First, Middle Initial) Rich Kessler	Date of Receipt MM / DD / YYYY 05 / 29 / 2009
	Mailing Address 3123 Overlook Circle	Transaction ID: SA11AI.7999
	City State Zip Code Hilland Village TX 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 ▼ 788.90	

SUBTOTAL of Receipts This Page (optional)	264.41
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 / 17
	<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) Marv Labrador		Date of Receipt MM / DD / YYYY 05 / 28 / 2009
	Mailing Address P.O. Box 8897		Transaction ID: SA11AI.7998
	City Tamuning	State GU	Zip Code 96931
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
	Name of Employer Horizon Lines	Occupation General Manager, Country Mgmt	payroll deduction weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 630.00	

B.	Full Name (Last, First, Middle Initial) Mike A Lynch		Date of Receipt MM / DD / YYYY 05 / 28 / 2009
	Mailing Address P.O. Box 921127		Transaction ID: SA11AI.8012
	City Dutch Hart	State AK	Zip Code 99692
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
	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 ▼ 210.00	

C.	Full Name (Last, First, Middle Initial) Huei-Ning P Pee		Date of Receipt MM / DD / YYYY 05 / 29 / 2009
	Mailing Address 1839 Darnell Circle		Transaction ID: SA11AI.7993
	City Frisco	State TX	Zip Code 00007
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 89.52
	Name of Employer Horizon Lines	Occupation Manager Applications	payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 447.60	

SUBTOTAL of Receipts This Page (optional)	▶	249.52
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 / 17
	<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) Charles G. Raymond	Date of Receipt MM / DD / YYYY 05 / 29 / 2009
	Mailing Address 9015 Winged Bourne Rd	Transaction ID: SA11AI.7967
	City State Zip Code Charlotte NC 28210	Amount of Each Receipt this Period 533.33
	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 ▼ 2666.65	

B.	Full Name (Last, First, Middle Initial) Sam Raymond	Date of Receipt MM / DD / YYYY 05 / 29 / 2009
	Mailing Address 6143 Cedar Croft Drive	Transaction ID: SA11AI.7974
	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 ▼ 429.15	

C.	Full Name (Last, First, Middle Initial) Dave Rodger	Date of Receipt MM / DD / YYYY 05 / 29 / 2009
	Mailing Address 149 Blauvelt Ave	Transaction ID: SA11AI.7975
	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 ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	661.16
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 / 17
	<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) Jose Rodriguez	Date of Receipt MM / DD / YYYY 05 / 29 / 2009
	Mailing Address Alturas de Torrimar	Transaction ID: SA11AI.7992
	City State Zip Code San Juan PR 00969	Amount of Each Receipt this Period 68.75
	FEC ID number of contributing federal political committee. C	payroll deduction monthly
	Name of Employer Occupation Horizon Lines General Manager, Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 343.75	

B.	Full Name (Last, First, Middle Initial) Claudia Stone	Date of Receipt MM / DD / YYYY 05 / 29 / 2009
	Mailing Address 3 Atwood Avenue	Transaction ID: SA11AI.7977
	City State Zip Code Pompton Plains NJ 07444	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	payroll deduction monthly
	Name of Employer Occupation Horizon Lines Assistant General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Brian Taylor	Date of Receipt MM / DD / YYYY 05 / 29 / 2009
	Mailing Address 150 Kaapuni Drive	Transaction ID: SA11AI.8010
	City State Zip Code Kallua HI 96734	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	payroll deduction monthly
	Name of Employer Occupation Horizon Lines VP Country Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	178.75
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 13 / 17

(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)

Duncan Wright

Mailing Address 5411 Vanderbilt Avenue

City State Zip Code
Dallas TX 75206

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

Name of Employer Occupation
Horizon Lines Manager, Marketing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 243.10

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.7983

Amount of Each Receipt this Period

48.62

payroll deduction monthly

B.

Full Name (Last, First, Middle Initial)

Robert Zuckerman

Mailing Address 19233 Hidden Cove Lane

City State Zip Code
Cornelius NC 28031

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

Name of Employer Occupation
Horizon Lines VP Legal

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 835.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.7970

Amount of Each Receipt this Period

167.00

payroll deduction monthly

SUBTOTAL of Receipts This Page (optional)

215.62

TOTAL This Period (last page this line number only)

2240.66

**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)

<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) CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE <hr/> Mailing Address PO BOX 1631 <hr/> City BALTIMORE State MD Zip Code 21203 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 07 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.7961 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE <hr/> Mailing Address PO BOX 1631 <hr/> City BALTIMORE State MD Zip Code 21203 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 07 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.7965 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 8 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) FRIENDS OF BENNIE THOMPSON <hr/> Mailing Address P.O. Box 100 P.O. Box 100 <hr/> City Bolton State MS Zip Code 39041 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.7963 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 1500.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

**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)

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<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) GENE TAYLOR FOR CONGRESS COMMITTEE	Transaction ID: SB23.7964 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 9
	Mailing Address POST OFFICE BOX 3838 POST OFFICE BOX 38 City BAY ST LOIS State MS Zip Code 39520 Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MS District: 04
Amount of Each Disbursement this Period 1000.00	
B. Full Name (Last, First, Middle Initial) LAUTENBERG FOR U S SENATE COMMITTEE	Transaction ID: SB23.7962 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 9
	Mailing Address ONE NEWARK CENTER City NEWARK State NJ Zip Code 07102 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 00
Amount of Each Disbursement this Period 1000.00	

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

7000.00

**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)

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<input 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 checked="" 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

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
bank fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.7960

Date of Disbursement

05 / 15 / 2009

Amount of Each Disbursement this Period

178.92

SUBTOTAL of Disbursements This Page (optional)

178.92

TOTAL This Period (last page this line number only)

178.92

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 17 / 17
	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