

# 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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

ADDRESS (number and street) 2001 K Street, NW, Suite 400

Attn: W. Farah

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 checked="" 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 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 07 01 2011 through 07 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 08 09 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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

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="2011"/>		63275.67
(b) Cash on Hand at Beginning of Reporting Period .....	55532.75	
(c) Total Receipts (from Line 19) .....	1522.77	11355.73
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	57055.52	74631.40
7. Total Disbursements (from Line 31) .....	5500.00	23075.88
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	51555.52	51555.52
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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

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) .....	1324.06	7343.20
(ii) Unitemized .....	198.71	5582.67
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	1522.77	12925.87
(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) .....	1522.77	12925.87
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	-1608.08
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)) .....	1522.77	11355.73
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1522.77	11355.73

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.....	5500.00	23000.00
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))..	5500.00	23075.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5500.00	23075.88

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) .....	1522.77	12925.87
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1522.77	12925.87
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: (check only one)	PAGE 6 / 18
	<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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael Avara		Date of Receipt MM / DD / YYYY 07 / 21 / 2011
	Mailing Address 1218 Hillshire Meadow Drive		<b>Transaction ID:</b> SA11AI.9768
	City Matthews	State NC	Zip Code 28105
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
	Name of Employer Horizon Lines, LLC	Occupation Sr VP, Finance & CFO	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Charles Battiato		Date of Receipt MM / DD / YYYY 07 / 21 / 2011
	Mailing Address P.O. Box 894715		<b>Transaction ID:</b> SA11AI.9754
	City Mililani	State HI	Zip Code 96789
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 51.33
	Name of Employer Horizon Lines	Occupation Manager, Sales	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 359.31	

<b>C.</b>	Full Name (Last, First, Middle Initial) Henry Bell		Date of Receipt MM / DD / YYYY 07 / 21 / 2011
	Mailing Address 4701 Preston Park Blvd		<b>Transaction ID:</b> SA11AI.9761
	City Plano	State TX	Zip Code 75093
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
	Name of Employer Horizon Lines	Occupation Financial Analyst Manager	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	201.33
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 18
	<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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas M Bellerud		Date of Receipt MM / DD / YYYY 07 / 21 / 2011
	Mailing Address 3607 22nd St SE		Transaction ID: SA11AI.9759
	City Puyallup	State WA	Zip Code 98374
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 40.00
	Name of Employer Horizon Lines	Occupation Outside Sales	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Alfred Bozzuffi		Date of Receipt MM / DD / YYYY 07 / 21 / 2011
	Mailing Address 159 Bergen Street		Transaction ID: SA11AI.9775
	City Brooklyn	State NY	Zip Code 11217
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 45.83
	Name of Employer Horizon Lines	Occupation Naval Architect	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.81	

<b>C.</b>	Full Name (Last, First, Middle Initial) Marvin Buchanan		Date of Receipt MM / DD / YYYY 07 / 21 / 2011
	Mailing Address 6012 E Mercer Way		Transaction ID: SA11AI.9758
	City Mercer Island	State WA	Zip Code 98040
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 147.08
	Name of Employer Horizon Lines	Occupation Director, Marketing	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1029.56	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	232.91
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 18
	<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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

<b>A.</b>	Full Name (Last, First, Middle Initial) Erica Compton		Date of Receipt MM / DD / YYYY 07 / 21 / 2011
	Mailing Address 4838 Gurley Ave		Transaction ID: SA11AI.9753
	City Dallas	State TX	Zip Code 75223
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.20
	Name of Employer Horizon Lines	Occupation Manager, Collections	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 491.40	

<b>B.</b>	Full Name (Last, First, Middle Initial) Marion G. Davis		Date of Receipt MM / DD / YYYY 07 / 07 / 2011
	Mailing Address 11511 Brayton Drive C1		Transaction ID: SA11AI.9718
	City Anchorage	State AK	Zip Code 98516
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer Horizon Lines	Occupation Director, operations	Contributor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 675.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Marion G. Davis		Date of Receipt MM / DD / YYYY 07 / 14 / 2011
	Mailing Address 11511 Brayton Drive C1		Transaction ID: SA11AI.9719
	City Anchorage	State AK	Zip Code 98516
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer Horizon Lines	Occupation Director, operations	Contributor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	120.20
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 18
	<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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

<b>A.</b>	Full Name (Last, First, Middle Initial) Marion G. Davis	Date of Receipt MM / DD / YYYY 07 / 21 / 2011
	Mailing Address 11511 Brayton Drive C1	<b>Transaction ID:</b> SA11AI.9720
	City State Zip Code Anchorage AK 98516	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Contributor
	Name of Employer Occupation Horizon Lines Director, operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 725.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Marion G. Davis	Date of Receipt MM / DD / YYYY 07 / 28 / 2011
	Mailing Address 11511 Brayton Drive C1	<b>Transaction ID:</b> SA11AI.9721
	City State Zip Code Anchorage AK 98516	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Contributor
	Name of Employer Occupation Horizon Lines Director, operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Dwayne Fujitani	Date of Receipt MM / DD / YYYY 07 / 14 / 2011
	Mailing Address 1818a Aupuni St	<b>Transaction ID:</b> SA11AI.9727
	City State Zip Code Honolulu HI 96817	Amount of Each Receipt this Period 7.21
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Horizon Lines Manager, Port Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.88	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	57.21
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 18
	<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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

<b>A.</b>	Full Name (Last, First, Middle Initial) Dwayne Fujitani		Date of Receipt
	Mailing Address 1818a Aupuni St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Honolulu	HI	96817
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.9728
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 ▼	<input type="text"/> 7.21
		<input type="text"/> 209.09	Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Dwayne Fujitani		Date of Receipt
	Mailing Address 1818a Aupuni St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Honolulu	HI	96817
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.9730
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 ▼	<input type="text"/> 7.21
		<input type="text"/> 216.30	Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Lori A Galloway		Date of Receipt
	Mailing Address P.O. Box 111393		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Anchorage	AK	99511
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.9731
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 ▼	<input type="text"/> 15.00
		<input type="text"/> 405.00	contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 29.42
<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 11 / 18
	<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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

<b>A.</b>	Full Name (Last, First, Middle Initial) Lori A Galloway		Date of Receipt
	Mailing Address P.O. Box 111393		<input type="text" value="07"/> / <input type="text" value="14"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Anchorage	AK	99511
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Horizon Lines		Occupation Manager, Port Operations	<b>Transaction ID:</b> SA11AI.9732
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" value="15.00"/>
		<input type="text" value="420.00"/>	contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Lori A Galloway		Date of Receipt
	Mailing Address P.O. Box 111393		<input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Anchorage	AK	99511
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Horizon Lines		Occupation Manager, Port Operations	<b>Transaction ID:</b> SA11AI.9733
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" value="15.00"/>
		<input type="text" value="435.00"/>	contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Lori A Galloway		Date of Receipt
	Mailing Address P.O. Box 111393		<input type="text" value="07"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Anchorage	AK	99511
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Horizon Lines		Occupation Manager, Port Operations	<b>Transaction ID:</b> SA11AI.9734
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" value="15.00"/>
		<input type="text" value="450.00"/>	contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="45.00"/>
<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 12 / 18
	<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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

<b>A.</b>	Full Name (Last, First, Middle Initial) James Garrahan		Date of Receipt
	Mailing Address 73 Paseo De Orguideas		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 21 / 2011
	City	State	Zip Code
	Trujillo Alto	PR	00976
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.9777
Name of Employer Horizon Lines		Occupation Manager, Sales	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 350.00	Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Kenneth Gill		Date of Receipt
	Mailing Address 2911 Leeward Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 07 / 2011
	City	State	Zip Code
	Anchorage	AK	99516
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.9735
Name of Employer Horizon Lines		Occupation Manager, Business Processes	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"/> 10.00
		<input type="text"/> 270.00	Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Kenneth Gill		Date of Receipt
	Mailing Address 2911 Leeward Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 14 / 2011
	City	State	Zip Code
	Anchorage	AK	99516
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.9736
Name of Employer Horizon Lines		Occupation Manager, Business Processes	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"/> 10.00
		<input type="text"/> 280.00	Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 70.00
<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:	PAGE 13 / 18
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Horizon Lines LLC Associates Good Gov't Fund (Horizon Lines Associates Good Gov't Fund)

<b>A.</b>	Full Name (Last, First, Middle Initial) Kenneth Gill		Date of Receipt
	Mailing Address 2911 Leeward Place		<input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Anchorage	AK	99516
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Horizon Lines		Occupation Manager, Business Processes	Transaction ID: SA11AI.9737
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="290.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="10.00"/>
		Contribution	

<b>B.</b>	Full Name (Last, First, Middle Initial) Kenneth Gill		Date of Receipt
	Mailing Address 2911 Leeward Place		<input type="text" value="07"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Anchorage	AK	99516
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Horizon Lines		Occupation Manager, Business Processes	Transaction ID: SA11AI.9738
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="300.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="10.00"/>
		Contribution	

<b>C.</b>	Full Name (Last, First, Middle Initial) Claudette Hilbun		Date of Receipt
	Mailing Address 1413 Swallow Circle		<input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Lewisville	TX	75077
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Horizon lines		Occupation Director, Finance and Accounting	Transaction ID: SA11AI.9770
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="210.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="30.00"/>
		Contribution	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="50.00"/>
<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 14 / 18
	<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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

<b>A.</b>	Full Name (Last, First, Middle Initial) Sabrina M Jackson	Date of Receipt MM / DD / YYYY 07 / 21 / 2011
	Mailing Address 3106 Indian Trail Ct	<b>Transaction ID:</b> SA11AI.9757
	City State Zip Code Rowlett TX 75088	Amount of Each Receipt this Period 56.65
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
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 ▼ 396.55	

<b>B.</b>	Full Name (Last, First, Middle Initial) Marv Labrador	Date of Receipt MM / DD / YYYY 07 / 07 / 2011
	Mailing Address P.O. Box 8897	<b>Transaction ID:</b> SA11AI.9743
	City State Zip Code Tamuning GU 96931	Amount of Each Receipt this Period 32.31
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
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 ▼ 872.37	

<b>C.</b>	Full Name (Last, First, Middle Initial) Linda L Montgomery	Date of Receipt MM / DD / YYYY 07 / 21 / 2011
	Mailing Address 157 Simmons Drive	<b>Transaction ID:</b> SA11AI.9764
	City State Zip Code Copell TX 75019	Amount of Each Receipt this Period 36.45
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
Name of Employer Horizon Lines	Occupation Manager, Outbound Documentation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.15	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>125.41</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 18
	<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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

<b>A.</b>	Full Name (Last, First, Middle Initial) Leslie Peters	Date of Receipt MM / DD / YYYY 07 / 21 / 2011
	Mailing Address 21 Shippen Court	<b>Transaction ID:</b> SA11AI.9760
	City State Zip Code Flemington NJ 08822	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Horizon Lines Regional Sales, International	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 379.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Claudia Stone	Date of Receipt MM / DD / YYYY 07 / 21 / 2011
	Mailing Address 3 Atwood Avenue	<b>Transaction ID:</b> SA11AI.9773
	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	Contribution
	Name of Employer Occupation Horizon Lines Representative/ Temp/Misc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Brian Taylor	Date of Receipt MM / DD / YYYY 07 / 21 / 2011
	Mailing Address 150 Kaapuni Drive	<b>Transaction ID:</b> SA11AI.9766
	City State Zip Code Kallua HI 96734	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Contribution
	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 ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	111.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 18
	<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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

<b>A.</b>	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 07 / 21 / 2011
	City	State	Zip Code
	Charlotte	NC	28270
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.9771
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 ▼ 802.06	<input type="text"/> 114.58
			Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert Zuckerman		Date of Receipt
	Mailing Address 19233 Hidden Cove Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 21 / 2011
	City	State	Zip Code
	Cornelius	NC	28031
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.9772
Name of Employer Horizon Lines		Occupation VP Legal	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 ▼ 1169.00	<input type="text"/> 167.00
			Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 281.58
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 1324.06



**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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>COMMITTEE TO RE-ELECT LORETTA SANCHEZ</b>	<b>Transaction ID:</b> SB23.9781 Date of Disbursement 07 / 18 / 2011	
	Mailing Address 1212 S. VICTORY BLVD.		
	City BURBANK State CA Zip Code 91502 Purpose of Disbursement Contribution Candidate Name LORETTA SANCHEZ Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 47	Amount of Each Disbursement this Period 2500.00	Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE</b>	<b>Transaction ID:</b> SB23.9789 Date of Disbursement 07 / 07 / 2011	
	Mailing Address PO BOX 1631		
	City BALTIMORE State MD Zip Code 21203 Purpose of Disbursement contribution Candidate Name ELIJAH E CUMMINGS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MD District: 07	Amount of Each Disbursement this Period 1000.00	Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>FRIENDS OF BENNIE THOMPSON</b>	<b>Transaction ID:</b> SB23.9780 Date of Disbursement 07 / 07 / 2011	
	Mailing Address P.O. Box 100 P.O. Box 100		
	City Bolton State MS Zip Code 39041 Purpose of Disbursement Contribution Candidate Name BENNIE G. THOMPSON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MS District: 02	Amount of Each Disbursement this Period 1000.00	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4500.00</b>
<b>TOTAL</b> 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)

PAGE 18 / 18

<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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

Full Name (Last, First, Middle Initial)

**A.** NEW YORK SHIPPING ASSOCIATION INC POLITICAL ACTION COMMITTEE

Mailing Address 333 THORNALL STREET SUITE 3A

City EDISON State NJ Zip Code 08837

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

PAC Contribution

Transaction ID: SB23.9787

Date of Disbursement

07 / 28 / 2011

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

5500.00