

# 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 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 checked="" 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 09 01 2010 through 09 30 2010

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 08 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: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	X	Y	Y	Y	2	0	1	0		77975.29
X	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	76372.93									
(c) Total Receipts (from Line 19) .....	2758.59	27456.23								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	79131.52	105431.52								
7. Total Disbursements (from Line 31) .....	12500.00	38800.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	66631.52	66631.52								
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) .....	2495.14	19903.22
(ii) Unitemized .....	263.45	7553.01
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	2758.59	27456.23
(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) .....	2758.59	27456.23
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)) .....	2758.59	27456.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2758.59	27456.23

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.....	12500.00	38800.00
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))..	12500.00	38800.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12500.00	38800.00

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) .....	2758.59	27456.23
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2758.59	27456.23
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: PAGE 6 / 18  
(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

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)

**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 Occupation  
Horizon Lines, LLC Sr VP, Finance & CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2010

**Transaction ID:** SA11AI.8863

Amount of Each Receipt this Period  
100.00

payroll deduction

**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 Occupation  
Horizon Lines Manager, Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
461.97

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2010

**Transaction ID:** SA11AI.8884

Amount of Each Receipt this Period  
51.33

payroll deduction

**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 Occupation  
Horizon Lines Financial Analyst Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2010

**Transaction ID:** SA11AI.8886

Amount of Each Receipt this Period  
50.00

payroll deduction

**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 / 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 09 / 30 / 2010
	Mailing Address 3607 22nd St SE	<b>Transaction ID:</b> SA11AI.8882
	City Puyallup State WA Zip Code 98374	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction
	Name of Employer Horizon Lines Occupation Outside Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mark Blankenship	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 4064 Colony Road Suite 200	<b>Transaction ID:</b> SA11AI.8866
	City Charlotte State NC Zip Code 28211	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction
	Name of Employer Horizon Lines Occupation VP, Controller Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 675.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Alfred Bozzuffi	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 159 Bergen Street	<b>Transaction ID:</b> SA11AI.8857
	City Brooklyn State NY Zip Code 11217	Amount of Each Receipt this Period 45.83
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction
	Name of Employer Horizon Lines Occupation Naval Architect Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 392.89	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>160.83</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 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) Marvin Buchanan	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 6012 E Mercer Way	<b>Transaction ID:</b> SA11AI.8872
	City State Zip Code Mercer Island WA 98040	Amount of Each Receipt this Period 147.08
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction
	Name of Employer Occupation Horizon Lines Director, Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1323.72	

<b>B.</b>	Full Name (Last, First, Middle Initial) Erica Compton	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 4838 Gurley Ave	<b>Transaction ID:</b> SA11AI.8876
	City State Zip Code Dallas TX 75223	Amount of Each Receipt this Period 70.20
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction
	Name of Employer Occupation Horizon Lines Manager, Collections	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 631.80	

<b>C.</b>	Full Name (Last, First, Middle Initial) Marion G. Davis	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 11511 Brayton Drive C1	<b>Transaction ID:</b> SA11AI.8893
	City State Zip Code Anchorage AK 98516	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction
	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 ▼ 975.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>342.28</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 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) Dwayne Fujitani		Date of Receipt MM / DD / YYYY 09 / 30 / 2010		
	Mailing Address 1818a Aupuni St		<b>Transaction ID:</b> SA11AI.8892		
	City Honolulu	State HI	Zip Code 96817	Amount of Each Receipt this Period 36.05	
	FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction		
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 ▼ 281.19			

<b>B.</b>	Full Name (Last, First, Middle Initial) Lori A Galloway		Date of Receipt MM / DD / YYYY 09 / 30 / 2010		
	Mailing Address P.O. Box 111393		<b>Transaction ID:</b> SA11AI.8887		
	City Anchorage	State AK	Zip Code 99511	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction		
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 ▼ 585.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) James Garrahan		Date of Receipt MM / DD / YYYY 09 / 30 / 2010		
	Mailing Address 73 Paseo De Orguideas		<b>Transaction ID:</b> SA11AI.8856		
	City Trujillo Alto	State PR	Zip Code 00976	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction		
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 ▼ 450.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	161.05
<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) Kenneth Gill		Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 2911 Leeward Place		<b>Transaction ID:</b> SA11AI.8850
	City Anchorage	State AK	Zip Code 99516
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
	Name of Employer Horizon Lines		Occupation Manager, Business Processes
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00	payroll deduction

<b>B.</b>	Full Name (Last, First, Middle Initial) Claudette Hilbun		Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 1413 Swallow Circle		<b>Transaction ID:</b> SA11AI.8870
	City Lewisville	State TX	Zip Code 75077
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
	Name of Employer Horizon lines		Occupation Director, Finance and Accounting
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00	payroll deduction

<b>C.</b>	Full Name (Last, First, Middle Initial) Paul F Hydock		Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 5890 Tarta Tropicana Condo		<b>Transaction ID:</b> SA11AI.8862
	City Carolina	State PR	Zip Code 00979
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 34.96
	Name of Employer Horizon Lines		Occupation Director, Agency and Logistics
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 314.64	payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	114.96
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 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) Sabrina M Jackson		Date of Receipt
	Mailing Address 3106 Indian Trail Ct		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Rowlett	TX	75088
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	<b>Transaction ID:</b> SA11AI.8871
Name of Employer Horizon Lines		Occupation OTC Documenting and Finance	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" value="56.65"/>
		<input type="text" value="509.85"/>	payroll deduction

<b>B.</b>	Full Name (Last, First, Middle Initial) Marv Labrador		Date of Receipt
	Mailing Address P.O. Box 8897		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Tamuning	GU	96931
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	<b>Transaction ID:</b> SA11AI.8880
Name of Employer Horizon Lines		Occupation General Manager, Country Mgmt	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="161.55"/>
		<input type="text" value="1260.09"/>	payroll deduction

<b>C.</b>	Full Name (Last, First, Middle Initial) Linda L Montgomery		Date of Receipt
	Mailing Address 157 Simmons Drive		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Copell	TX	75019
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	<b>Transaction ID:</b> SA11AI.8881
Name of Employer Horizon Lines		Occupation Manager, Outbound Documentation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="36.45"/>
		<input type="text" value="328.05"/>	payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="254.65"/>
<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) Anita M. Olson		Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 1724 Tawakoni Lane		<b>Transaction ID:</b> SA11AI.8875
	City Plano	State TX	Zip Code 75075
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
	Name of Employer Horizon Lines	Occupation Manager, operations	payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Leslie Peters		Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 21 Shippen Court		<b>Transaction ID:</b> SA11AI.8879
	City Flemington	State NJ	Zip Code 08822
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 125.00
	Name of Employer Horizon Lines	Occupation Regional Sales, International	payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Charles G. Raymond		Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 9015 Winged Bourne Rd		<b>Transaction ID:</b> SA11AI.8851
	City Charlotte	State NC	Zip Code 28210
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 554.17
	Name of Employer Horizon Lines	Occupation President & CEO	payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4987.53	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>704.17</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 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) Dave Rodger		Date of Receipt
	Mailing Address 149 Blauvelt Ave		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 30 / 2010
	City	State	Zip Code
	Ho Ho Kus	NJ	07423
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8859
Name of Employer Horizon Lines		Occupation Director, Technical Services	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 ▼ 378.00	<input type="text"/> 42.00
			payroll deduction

<b>B.</b>	Full Name (Last, First, Middle Initial) Jose Rodriguez		Date of Receipt
	Mailing Address ALTURAS DE TORRIMAR CALLE 7 #15-1		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 30 / 2010
	City	State	Zip Code
	Guaynabo	PR	00969
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8874
Name of Employer Horizon Lines		Occupation General Manager, Sales	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 628.11	<input type="text"/> 69.79
			payroll deduction

<b>C.</b>	Full Name (Last, First, Middle Initial) Claudia Stone		Date of Receipt
	Mailing Address 3 Atwood Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 30 / 2010
	City	State	Zip Code
	Pompton Plains	NJ	07444
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8861
Name of Employer Horizon Lines		Occupation Representative/ Temp/Misc	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 ▼ 540.00	<input type="text"/> 60.00
			payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 171.79
<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) Brian Taylor		Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 150 Kaapuni Drive		<b>Transaction ID:</b> SA11AI.8894
	City Kallua	State HI	Zip Code 96734
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
	Name of Employer Horizon Lines	Occupation VP Country Management	payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Duncan Wright		Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 5411 Vanderbilt Avenue		<b>Transaction ID:</b> SA11AI.8867
	City Dallas	State TX	Zip Code 75206
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 52.50
	Name of Employer Horizon Lines	Occupation Manager, Marketing	payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 472.50	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael, Zendan		Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 943 Longfield Circle		<b>Transaction ID:</b> SA11AI.8853
	City Charlotte	State NC	Zip Code 28270
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 114.58
	Name of Employer Horizon Lines	Occupation VP, Deputy General Counsel	payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1031.22	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>217.08</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:		PAGE 15 / 18	
	(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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert Zuckerman		Date of Receipt		
	Mailing Address 19233 Hidden Cove Lane		M M / D D / Y Y Y Y 09 / 30 / 2010		
	City Cornelius	State NC	Zip Code 28031	<b>Transaction ID:</b> SA11AI.8855	
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 167.00		
	Name of Employer Horizon Lines	Occupation VP Legal		payroll deduction	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1503.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	167.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2495.14

**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 16 / 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)

<b>A.</b> Full Name (Last, First, Middle Initial) <b>COMMITTEE TO RE-ELECT LINDA SANCHEZ</b> <hr/> Mailing Address 1212 S. Victory Blvd SUITE 211 <hr/> City BURBANK State CA Zip Code 91502 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> Category/Type <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 39 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.8841 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 5000.00
	<b>B.</b> Full Name (Last, First, Middle Initial) <b>CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE</b> <hr/> Mailing Address PO BOX 1631 <hr/> City BALTIMORE State MD Zip Code 21203 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> Category/Type <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 07 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) <b>LOBIONDO FOR CONGRESS</b> <hr/> Mailing Address PO BOX 775 <hr/> City MARMORA State NJ Zip Code 08223 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> Category/Type <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.8846 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1000.00

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

8500.00

**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)

<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>MICA FOR CONGRESS</b> Mailing Address P. O. Box 181546 City Casselberry State FL Zip Code 32718 Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 07 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8845 Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2010
	Amount of Each Disbursement this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) <b>PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN</b> Mailing Address PO BOX 3662 City SEATTLE State WA Zip Code 98124 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8847 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 500.00
<b>C.</b> Full Name (Last, First, Middle Initial) <b>SUE MYRICK FOR CONGRESS</b> Mailing Address P.O. Box 37091 City Charlotte State NC Zip Code 28237 Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8843 Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2010
	Amount of Each Disbursement this Period 1500.00

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

3000.00

**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)

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)

A.

Full Name (Last, First, Middle Initial)

TIBERI FOR CONGRESS

Transaction ID: SB23.8848

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	1	0

Mailing Address 2931 E Dublin Granville Road  
Suite 190

City State Zip Code  
Columbus OH 43231

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: OH District: 12

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

1000.00
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TOTAL This Period (last page this line number only) ..... ►

12500.00
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