

# 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** 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 08 01 2011 through 08 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 09 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 **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	8

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		63275.67
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	51555.52									
(c) Total Receipts (from Line 19) .....	1460.96	12816.69								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	53016.48	76092.36								
7. Total Disbursements (from Line 31) .....	1000.00	24075.88								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	52016.48	52016.48								
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: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	1268.96	8612.16
(ii) Unitemized .....	192.00	5774.67
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	1460.96	14386.83
(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) .....	1460.96	14386.83
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)) .....	1460.96	12816.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1460.96	12816.69

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.....	1000.00	24000.00
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))..	1000.00	24075.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1000.00	24075.88

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) .....	1460.96	14386.83
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1460.96	14386.83
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 / 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 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 08 / 18 / 2011		
	Mailing Address 1218 Hillshire Meadow Drive		<b>Transaction ID:</b> SA11AI.9793		
	City Matthews	State NC	Zip Code 28105	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer Horizon Lines, LLC	Occupation Sr VP, Finance & CFO		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼  
800.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Charles Battiatto		Date of Receipt MM / DD / YYYY 08 / 18 / 2011		
	Mailing Address P.O. Box 894715		<b>Transaction ID:</b> SA11AI.9794		
	City Mililani	State HI	Zip Code 96789	Amount of Each Receipt this Period 51.33	
	FEC ID number of contributing federal political committee. C		Contribution		
	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 ▼  
410.64

<b>C.</b>	Full Name (Last, First, Middle Initial) Henry Bell		Date of Receipt MM / DD / YYYY 08 / 18 / 2011		
	Mailing Address 4701 Preston Park Blvd		<b>Transaction ID:</b> SA11AI.9795		
	City Plano	State TX	Zip Code 75093	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer Horizon Lines	Occupation Financial Analyst Manager		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼  
400.00

<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 / 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 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 08 / 18 / 2011
	Mailing Address 3607 22nd St SE		<b>Transaction ID:</b> SA11AI.9796
	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 ▼ 320.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Alfred Bozzuffi		Date of Receipt MM / DD / YYYY 08 / 18 / 2011
	Mailing Address 159 Bergen Street		<b>Transaction ID:</b> SA11AI.9798
	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 ▼ 366.64	

<b>C.</b>	Full Name (Last, First, Middle Initial) Marvin Buchanan		Date of Receipt MM / DD / YYYY 08 / 18 / 2011
	Mailing Address 6012 E Mercer Way		<b>Transaction ID:</b> SA11AI.9800
	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 ▼ 1176.64	

<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 / 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 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 08 / 18 / 2011
	Mailing Address 4838 Gurley Ave		<b>Transaction ID:</b> SA11AI.9799
	City Dallas	State TX	Zip Code 75223
	FEC ID number of contributing federal political committee. <b>C</b>		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 ▼ 561.60	

<b>B.</b>	Full Name (Last, First, Middle Initial) Marion G. Davis		Date of Receipt MM / DD / YYYY 08 / 04 / 2011
	Mailing Address 11511 Brayton Drive C1		<b>Transaction ID:</b> SA11AI.9801
	City Anchorage	State AK	Zip Code 98516
	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 Director, operations	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 775.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Marion G. Davis		Date of Receipt MM / DD / YYYY 08 / 11 / 2011
	Mailing Address 11511 Brayton Drive C1		<b>Transaction ID:</b> SA11AI.9802
	City Anchorage	State AK	Zip Code 98516
	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 Director, operations	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00	

<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 / 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 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 08 / 18 / 2011
	Mailing Address 11511 Brayton Drive C1	<b>Transaction ID:</b> SA11AI.9803
	City State Zip Code Anchorage AK 98516	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Contribution
	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 ▼ 825.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Marion G. Davis	Date of Receipt MM / DD / YYYY 08 / 25 / 2011
	Mailing Address 11511 Brayton Drive C1	<b>Transaction ID:</b> SA11AI.9804
	City State Zip Code Anchorage AK 98516	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Contribution
	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 ▼ 850.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Dwayne Fujitani	Date of Receipt MM / DD / YYYY 08 / 04 / 2011
	Mailing Address 1818a Aupuni St	<b>Transaction ID:</b> SA11AI.9809
	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 ▼ 223.51	

<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 / 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 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" value="08"/> / <input type="text" value="11"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Honolulu	HI	96817
	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.9810
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="230.72"/>	<input type="text" value="7.21"/>
Contribution			

<b>B.</b>	Full Name (Last, First, Middle Initial) Dwayne Fujitani		Date of Receipt
	Mailing Address 1818a Aupuni St		<input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Honolulu	HI	96817
	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.9811
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="237.93"/>	<input type="text" value="7.21"/>
Contribution			

<b>C.</b>	Full Name (Last, First, Middle Initial) Dwayne Fujitani		Date of Receipt
	Mailing Address 1818a Aupuni St		<input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Honolulu	HI	96817
	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.9812
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="245.14"/>	<input type="text" value="7.21"/>
Contribution			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="21.63"/>
<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 / 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 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 MM / DD / YYYY 08 / 04 / 2011
	Mailing Address P.O. Box 111393		<b>Transaction ID:</b> SA11AI.9813
	City Anchorage	State AK	Zip Code 99511
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer Horizon Lines		Occupation Manager, Port Operations	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 465.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Lori A Galloway		Date of Receipt MM / DD / YYYY 08 / 11 / 2011
	Mailing Address P.O. Box 111393		<b>Transaction ID:</b> SA11AI.9814
	City Anchorage	State AK	Zip Code 99511
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer Horizon Lines		Occupation Manager, Port Operations	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Lori A Galloway		Date of Receipt MM / DD / YYYY 08 / 18 / 2011
	Mailing Address P.O. Box 111393		<b>Transaction ID:</b> SA11AI.9815
	City Anchorage	State AK	Zip Code 99511
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer Horizon Lines		Occupation Manager, Port Operations	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 495.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	45.00
<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 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 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 MM / DD / YYYY 08 / 25 / 2011
	Mailing Address P.O. Box 111393		Transaction ID: SA11AI.9816
	City Anchorage	State AK	Zip Code 99511
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
	Name of Employer Horizon Lines	Occupation Manager, Port Operations	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 510.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) James Garrahan		Date of Receipt MM / DD / YYYY 08 / 18 / 2011
	Mailing Address 73 Paseo De Orguideas		Transaction ID: SA11AI.9817
	City Trujillo Alto	State PR	Zip Code 00976
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	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 ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kenneth Gill		Date of Receipt MM / DD / YYYY 08 / 04 / 2011
	Mailing Address 2911 Leeward Place		Transaction ID: SA11AI.9818
	City Anchorage	State AK	Zip Code 99516
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
	Name of Employer Horizon Lines	Occupation Manager, Business Processes	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 310.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	75.00
<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 13 / 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 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 08 / 11 / 2011
	Mailing Address 2911 Leeward Place		<b>Transaction ID:</b> SA11AI.9819
	City Anchorage	State AK	Zip Code 99516
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 10.00
	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 ▼ 320.00	Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Kenneth Gill		Date of Receipt MM / DD / YYYY 08 / 18 / 2011
	Mailing Address 2911 Leeward Place		<b>Transaction ID:</b> SA11AI.9820
	City Anchorage	State AK	Zip Code 99516
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 10.00
	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 ▼ 330.00	Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Kenneth Gill		Date of Receipt MM / DD / YYYY 08 / 25 / 2011
	Mailing Address 2911 Leeward Place		<b>Transaction ID:</b> SA11AI.9821
	City Anchorage	State AK	Zip Code 99516
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 10.00
	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 ▼ 340.00	Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	30.00
<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 14 / 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 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"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 18 / 2011
	City	State	Zip Code
	Rowlett	TX	75088
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	<b>Transaction ID:</b> SA11AI.9823
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"/> 56.65
		<input type="text"/> 453.20	Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Linda L Montgomery		Date of Receipt
	Mailing Address 157 Simmons Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 18 / 2011
	City	State	Zip Code
	Copell	TX	75019
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	<b>Transaction ID:</b> SA11AI.9830
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"/> 36.45
		<input type="text"/> 291.60	Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Leslie Peters		Date of Receipt
	Mailing Address 21 Shippen Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 18 / 2011
	City	State	Zip Code
	Flemington	NJ	08822
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	<b>Transaction ID:</b> SA11AI.9839
Name of Employer Horizon Lines		Occupation Regional Sales, International	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"/> 1.00
		<input type="text"/> 380.00	Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 94.10
<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 15 / 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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

<b>A.</b>	Full Name (Last, First, Middle Initial) Claudia Stone		Date of Receipt MM / DD / YYYY 08 / 18 / 2011
	Mailing Address 3 Atwood Avenue		<b>Transaction ID:</b> SA11AI.9846
	City Pompton Plains	State NJ	Zip Code 07444
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
	Name of Employer Horizon Lines	Occupation Representative/ Temp/Misc	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 480.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Brian Taylor		Date of Receipt MM / DD / YYYY 08 / 18 / 2011
	Mailing Address 150 Kaapuni Drive		<b>Transaction ID:</b> SA11AI.9847
	City Kallua	State HI	Zip Code 96734
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer Horizon Lines	Occupation VP Country Management	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael, Zendan		Date of Receipt MM / DD / YYYY 08 / 18 / 2011
	Mailing Address 943 Longfield Circle		<b>Transaction ID:</b> SA11AI.9848
	City Charlotte	State NC	Zip Code 28270
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 114.58
	Name of Employer Horizon Lines	Occupation VP, Deputy General Counsel	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 916.64	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	224.58
<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 16 / 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"/> 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 08 / 18 / 2011		
	City Cornelius	State NC	Zip Code 28031	<b>Transaction ID:</b> SA11AI.9849	
	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		Contribution	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1336.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	167.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1268.96



