

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2013"/>		30164.03
(b) Cash on Hand at Beginning of Reporting Period.....	34549.59	
(c) Total Receipts (from Line 19)	1196.46	16582.02
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	35746.05	46746.05
7. Total Disbursements (from Line 31).....	2500.00	13500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	33246.05	33246.05
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Horizon Lines LLC Associates Good 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).....	1070.04	12627.69
(ii) Unitemized	126.42	3954.33
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1196.46	16582.02
(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)	1196.46	16582.02
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 Transfers (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))..... ▶	1196.46	16582.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1196.46	16582.02

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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.....	2500.00	13500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated 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)) ..	2500.00	13500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2500.00	13500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	1196.46	16582.02
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1196.46	16582.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)

Full Name (Last, First, Middle Initial) A. Henry Bell		Date of Receipt
Mailing Address 4701 Preston Park Blvd		M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2013
City Plano	State TX	Zip Code 75093
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.11434
Name of Employer Horizon Lines		Amount of Each Receipt this Period
Occupation Financial Analyst Manager		500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		contribution
Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Alfred Bozzuffi		Date of Receipt
Mailing Address 159 Bergen Street		M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2013
City Brooklyn	State NY	Zip Code 11217
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.11435
Name of Employer Horizon Lines		Amount of Each Receipt this Period
Occupation Naval Architect		478.10
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		contribution
Aggregate Year-to-Date ▼ 478.10		

Full Name (Last, First, Middle Initial) C. Marvin Buchanan		Date of Receipt
Mailing Address 6012 E Mercer Way		M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2013
City Mercer Island	State WA	Zip Code 98040
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.11436
Name of Employer Horizon Lines		Amount of Each Receipt this Period
Occupation VP, Sales & Mktg, Alaska		1534.20
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		contribution
Aggregate Year-to-Date ▼ 1534.20		

SUBTOTAL of Receipts This Page (optional).....▶	251.23
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 OF 19
	<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	<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)

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

Mailing Address 11511 Brayton Drive C1

City Anchorage State AK Zip Code 98516

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

Name of Employer Horizon Lines Occupation VP And General Mgr, Alaska

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2013
Transaction ID : SA11AI.11392

Amount of Each Receipt this Period
 25.00
 contribution

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

Mailing Address 11511 Brayton Drive C1

City Anchorage State AK Zip Code 98516

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

Name of Employer Horizon Lines Occupation VP And General Mgr, Alaska

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1025.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2013
Transaction ID : SA11AI.11400

Amount of Each Receipt this Period
 25.00
 contribution

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

Mailing Address 11511 Brayton Drive C1

City Anchorage State AK Zip Code 98516

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

Name of Employer Horizon Lines Occupation VP And General Mgr, Alaska

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2013
Transaction ID : SA11AI.11408

Amount of Each Receipt this Period
 25.00
 contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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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. Marion G. Davis

Mailing Address 11511 Brayton Drive C1

City Anchorage	State AK	Zip Code 98516
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FEC ID number of contributing federal political committee. **C**

Name of Employer Horizon Lines	Occupation VP And General Mgr, Alaska
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1075.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 24 / 2013

Transaction ID : SA11Al.11416

Amount of Each Receipt this Period
 25.00

contribution

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

Mailing Address 11511 Brayton Drive C1

City Anchorage	State AK	Zip Code 98516
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FEC ID number of contributing federal political committee. **C**

Name of Employer Horizon Lines	Occupation VP And General Mgr, Alaska
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 31 / 2013

Transaction ID : SA11Al.11417

Amount of Each Receipt this Period
 25.00

contribution

Full Name (Last, First, Middle Initial)
C. Dwayne Fujitani

Mailing Address 1818a Aupuni St

City Honolulu	State HI	Zip Code 96817
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FEC ID number of contributing federal political committee. **C**

Name of Employer Horizon Lines	Occupation Manager, Port Operations
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 317.20

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 03 / 2013

Transaction ID : SA11Al.11394

Amount of Each Receipt this Period
 7.93

contribution

SUBTOTAL of Receipts This Page (optional).....▶	57.93
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 19
	<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	<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)

Full Name (Last, First, Middle Initial) A. Dwayne Fujitani		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2013 Transaction ID : SA11AI.11401
Mailing Address 1818a Aupuni St		Amount of Each Receipt this Period 7.93 contribution
City Honolulu	State HI	Zip Code 96817
FEC ID number of contributing federal political committee. C	Name of Employer Horizon Lines	
Occupation Manager, Port Operations		Aggregate Year-to-Date ▼ 325.13
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dwayne Fujitani		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 17 / 2013 Transaction ID : SA11AI.11409
Mailing Address 1818a Aupuni St		Amount of Each Receipt this Period 7.93 contribution
City Honolulu	State HI	Zip Code 96817
FEC ID number of contributing federal political committee. C	Name of Employer Horizon Lines	
Occupation Manager, Port Operations		Aggregate Year-to-Date ▼ 333.06
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dwayne Fujitani		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2013 Transaction ID : SA11AI.11418
Mailing Address 1818a Aupuni St		Amount of Each Receipt this Period 7.93 contribution
City Honolulu	State HI	Zip Code 96817
FEC ID number of contributing federal political committee. C	Name of Employer Horizon Lines	
Occupation Manager, Port Operations		Aggregate Year-to-Date ▼ 340.99
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	23.79
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 19
	<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)

Full Name (Last, First, Middle Initial) A. Dwayne Fujitani		Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2013 Transaction ID : SA11AI.11419
Mailing Address 1818a Aupuni St		Amount of Each Receipt this Period 7.93 contribution
City Honolulu	State HI	Zip Code 96817
FEC ID number of contributing federal political committee.	C	
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 ▼ 348.92	

Full Name (Last, First, Middle Initial) B. Lori A Galloway		Date of Receipt M M / D D / Y Y Y Y Y 10 / 03 / 2013 Transaction ID : SA11AI.11395
Mailing Address P.O. Box 111393		Amount of Each Receipt this Period 15.00 contribution
City Anchorage	State AK	Zip Code 99511
FEC ID number of contributing federal political committee.	C	
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 ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Lori A Galloway		Date of Receipt M M / D D / Y Y Y Y Y 10 / 10 / 2013 Transaction ID : SA11AI.11405
Mailing Address P.O. Box 111393		Amount of Each Receipt this Period 15.00 contribution
City Anchorage	State AK	Zip Code 99511
FEC ID number of contributing federal political committee.	C	
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 ▼ 615.00	

SUBTOTAL of Receipts This Page (optional).....▶	37.93
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 19
	<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	<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)

A. Lori A Galloway
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 111393

City Anchorage	State AK	Zip Code 99511
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FEC ID number of contributing federal political committee. **C**

Name of Employer Horizon Lines	Occupation Manager, Port Operations
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2013

Transaction ID : SA11Al.11413

Amount of Each Receipt this Period

15.00

contribution

B. Lori A Galloway
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 111393

City Anchorage	State AK	Zip Code 99511
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FEC ID number of contributing federal political committee. **C**

Name of Employer Horizon Lines	Occupation Manager, Port Operations
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **645.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2013

Transaction ID : SA11Al.11426

Amount of Each Receipt this Period

15.00

contribution

C. Lori A Galloway
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 111393

City Anchorage	State AK	Zip Code 99511
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FEC ID number of contributing federal political committee. **C**

Name of Employer Horizon Lines	Occupation Manager, Port Operations
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2013

Transaction ID : SA11Al.11427

Amount of Each Receipt this Period

15.00

contribution

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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)

A. James Garrahan
 Full Name (Last, First, Middle Initial)
 Mailing Address 73 Paseo De Orquideas
 City Trujillo Alto State PR Zip Code 00976
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Horizon Lines Occupation Manager, Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2013
Transaction ID : SA11Al.11437
 Amount of Each Receipt this Period 500.00
 contribution

B. Kenneth Gill
 Full Name (Last, First, Middle Initial)
 Mailing Address 2911 Leeward Place
 City Anchorage State AK Zip Code 99516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Horizon Lines Occupation Manager, Business Processes
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 03 / 2013
Transaction ID : SA11Al.11396
 Amount of Each Receipt this Period 10.00
 contribution

C. Kenneth Gill
 Full Name (Last, First, Middle Initial)
 Mailing Address 2911 Leeward Place
 City Anchorage State AK Zip Code 99516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Horizon Lines Occupation Manager, Business Processes
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 10 / 2013
Transaction ID : SA11Al.11406
 Amount of Each Receipt this Period 10.00
 contribution

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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)

A. Kenneth Gill
 Full Name (Last, First, Middle Initial)
 Mailing Address 2911 Leeward Place
 City Anchorage State AK Zip Code 99516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Horizon Lines Occupation Manager, Business Processes
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt **10 / 17 / 2013**
Transaction ID : SA11AI.11414
 Amount of Each Receipt this Period **10.00**
 contribution

B. Kenneth Gill
 Full Name (Last, First, Middle Initial)
 Mailing Address 2911 Leeward Place
 City Anchorage State AK Zip Code 99516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Horizon Lines Occupation Manager, Business Processes
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **430.00**

Date of Receipt **10 / 24 / 2013**
Transaction ID : SA11AI.11428
 Amount of Each Receipt this Period **10.00**
 contribution

C. Kenneth Gill
 Full Name (Last, First, Middle Initial)
 Mailing Address 2911 Leeward Place
 City Anchorage State AK Zip Code 99516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Horizon Lines Occupation Manager, Business Processes
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **440.00**

Date of Receipt **10 / 31 / 2013**
Transaction ID : SA11AI.11429
 Amount of Each Receipt this Period **10.00**
 contribution

SUBTOTAL of Receipts This Page (optional).....	30.00
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 14 OF 19
	<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	<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)

A. Sabrina M Jackson
Full Name (Last, First, Middle Initial)
Mailing Address 3106 Indian Trail Ct
City Rowlett State TX Zip Code 75088
FEC ID number of contributing federal political committee. **C**
Name of Employer Horizon Lines Occupation OTC Documenting and Finance
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **586.30**

Date of Receipt **10 / 31 / 2013**
Transaction ID : SA11AI.11439
Amount of Each Receipt this Period **58.63**
contribution

B. Lana I Kanaha
Full Name (Last, First, Middle Initial)
Mailing Address 837 Kealahou St
City Honolulu State HI Zip Code 96825
FEC ID number of contributing federal political committee. **C**
Name of Employer Horizon Lines Occupation Supervisor, Port operations
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **205.00**

Date of Receipt **10 / 10 / 2013**
Transaction ID : SA11AI.11403
Amount of Each Receipt this Period **5.00**
contribution

C. Lana I Kanaha
Full Name (Last, First, Middle Initial)
Mailing Address 837 Kealahou St
City Honolulu State HI Zip Code 96825
FEC ID number of contributing federal political committee. **C**
Name of Employer Horizon Lines Occupation Supervisor, Port operations
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 17 / 2013**
Transaction ID : SA11AI.11411
Amount of Each Receipt this Period **5.00**
contribution

SUBTOTAL of Receipts This Page (optional)..... **68.63**
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 19
	<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)

Full Name (Last, First, Middle Initial) A. Lana I Kanaha		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2013 Transaction ID : SA11AI.11422
Mailing Address 837 Kealahou St		Amount of Each Receipt this Period 5.00 contribution
City Honolulu	State HI	Zip Code 96825
FEC ID number of contributing federal political committee. C	Name of Employer Horizon Lines	
Occupation Supervisor, Port operations		Aggregate Year-to-Date ▼ 215.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Lana I Kanaha		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2013 Transaction ID : SA11AI.11423
Mailing Address 837 Kealahou St		Amount of Each Receipt this Period 5.00 contribution
City Honolulu	State HI	Zip Code 96825
FEC ID number of contributing federal political committee. C	Name of Employer Horizon Lines	
Occupation Supervisor, Port operations		Aggregate Year-to-Date ▼ 220.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Linda L Montgomery		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2013 Transaction ID : SA11AI.11441
Mailing Address 157 Simmons Drive		Amount of Each Receipt this Period 36.45 contribution
City Copell	State TX	Zip Code 75019
FEC ID number of contributing federal political committee. C	Name of Employer Horizon Lines	
Occupation Manager, Outbound Documentation		Aggregate Year-to-Date ▼ 364.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	46.45
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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)

Full Name (Last, First, Middle Initial) A. Frank Roznerski		Date of Receipt 10 / 10 / 2013 Transaction ID : SA11Al.11402
Mailing Address 95-40 Haalohi St		Amount of Each Receipt this Period 5.00 contribution
City Mililani	State HI	Zip Code 06789
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00 contribution
Name of Employer Horizon Lines	Occupation Safety Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) B. Frank Roznerski		Date of Receipt 10 / 17 / 2013 Transaction ID : SA11Al.11410
Mailing Address 95-40 Haalohi St		Amount of Each Receipt this Period 5.00 contribution
City Mililani	State HI	Zip Code 06789
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00 contribution
Name of Employer Horizon Lines	Occupation Safety Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Frank Roznerski		Date of Receipt 10 / 24 / 2013 Transaction ID : SA11Al.11420
Mailing Address 95-40 Haalohi St		Amount of Each Receipt this Period 5.00 contribution
City Mililani	State HI	Zip Code 06789
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00 contribution
Name of Employer Horizon Lines	Occupation Safety Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

SUBTOTAL of Receipts This Page (optional).....▶	15.00
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 17 OF 19
	<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	<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)

Full Name (Last, First, Middle Initial) A. Frank Roznerski			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2013 Transaction ID : SA11AI.11421
Mailing Address 95-40 HaaloHi St			Amount of Each Receipt this Period contribution 5.00
City Mililani	State HI	Zip Code 06789	
FEC ID number of contributing federal political committee. C			
Name of Employer Horizon Lines	Occupation Safety Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

Full Name (Last, First, Middle Initial) B. Claudia Stone			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2013 Transaction ID : SA11AI.11446
Mailing Address 3 Atwood Avenue			Amount of Each Receipt this Period contribution 62.50
City Pompton Plains	State NJ	Zip Code 07444	
FEC ID number of contributing federal political committee. C			
Name of Employer Horizon Lines	Occupation Associate General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00		

Full Name (Last, First, Middle Initial) C. Michael Zendan			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2013 Transaction ID : SA11AI.11447
Mailing Address 943 Longfield Circle			Amount of Each Receipt this Period contribution 114.58
City Charlotte	State NC	Zip Code 28270	
FEC ID number of contributing federal political committee. C			
Name of Employer Horizon Lines	Occupation Executive Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1145.80		

SUBTOTAL of Receipts This Page (optional).....▶	182.08
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 18 OF 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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)

A. Robert Zuckerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 82nd Street
 Unit B
 City State Zip Code
 Virginia Beach VA 23451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Horizon Lines VP Government Affairs
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1670.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2013
Transaction ID : SA11A1.11448
 Amount of Each Receipt this Period
 167.00
 contribution

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	167.00
TOTAL This Period (last page this line number only).....▶	1070.04

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)

Full Name (Last, First, Middle Initial)

A. ALASKANS FOR BEGICH

Mailing Address PO BOX 240287

City ANCHORAGE State AK Zip Code 99524

Purpose of Disbursement contribution

Candidate Name

MARK BEGICH

Office Sought: House Senate President

State: AK District: 00

Disbursement For: 2014 Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2013

Transaction ID : SB23.11391

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

2500.00

2500.00
