

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines Horizon Lines, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

ADDRESS (number and street) 1050 Connecticut Ave NW Suite 1200 c/o T. WALLS WASHINGTON DC 20036 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00385179 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 03 01 2009 through 03 31 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Mark Blankenship

Signature of Treasurer Electronically Filed by Mark Blankenship Date 06 19 2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only FE6AN026 FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

Horizon Lines, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 3 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To:

| | |
|---|---|
| M | M |
| 0 | 3 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|----------|
| 6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 9 | | 78182.87 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 9 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 75580.80 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 2757.61 | 8963.87 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 78338.41 | 87146.74 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 7647.35 | 16455.68 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 70691.06 | 70691.06 | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

Horizon Lines, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

Report Covering the Period: From: To:

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | 1637.49 | 3592.24 |
| (i) Itemized (use Schedule A) | 1120.12 | 5371.63 |
| (ii) Unitemized | 2757.61 | 8963.87 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 2757.61 | 8963.87 |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 0.00 | 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)) | 2757.61 | 8963.87 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 2757.61 | 8963.87 |

DETAILED SUMMARY PAGE

of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share..... | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures..... | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... | 0.00 | 0.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 7500.00 | 16000.00 |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 10.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 0.00 | 10.00 |
| 29. Other Disbursements..... | 147.35 | 445.68 |
| 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)).. | 7647.35 | 16455.68 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 7647.35 | 16455.68 |

DETAILED SUMMARY PAGE
of Disbursements

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3 | 2757.61 | 8963.87 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 10.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 2757.61 | 8953.87 |
| 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 / 14 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Horizon Lines, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

| | | | | | |
|---|---|------------------------------------|---|--|--|
| A. | Full Name (Last, First, Middle Initial) Michael Avara | | Date of Receipt MM / DD / YYYY 03 / 31 / 2009 | | |
| | Mailing Address 1218 Hillshire Meadow Drive | | Transaction ID: SA11AI.7859 | | |
| | City Matthews | State NC | Zip Code 28105 | Amount of Each Receipt this Period 100.00 | |
| | FEC ID number of contributing federal political committee. C | | payroll deduction monthly | | |
| | 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 ▼ 300.00 | | | |

| | | | | | |
|---|---|------------------------------------|---|--|--|
| B. | Full Name (Last, First, Middle Initial) Marvin Buchanan | | Date of Receipt MM / DD / YYYY 03 / 31 / 2009 | | |
| | Mailing Address 6012 E Mercer Way | | Transaction ID: SA11AI.7866 | | |
| | City Mercer Island | State WA | Zip Code 98040 | Amount of Each Receipt this Period 145.00 | |
| | FEC ID number of contributing federal political committee. C | | payroll deduction monthly | | |
| | Name of Employer Horizon Lines | Occupation Director, Marketing | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 423.53 | | | |

| | | | | | |
|---|---|------------------------------------|---|---|--|
| C. | Full Name (Last, First, Middle Initial) Erica Compton | | Date of Receipt MM / DD / YYYY 03 / 31 / 2009 | | |
| | Mailing Address 4838 Gurley Ave | | Transaction ID: SA11AI.7872 | | |
| | City Dallas | State TX | Zip Code 75223 | Amount of Each Receipt this Period 70.20 | |
| | FEC ID number of contributing federal political committee. C | | payroll deduction monthly | | |
| | Name of Employer Horizon Lines | Occupation Manager, Collections | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 210.60 | | | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 315.20 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 / 14 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Horizon Lines, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

| | | |
|---|---|---|
| A. | Full Name (Last, First, Middle Initial) Marion G. Davis | Date of Receipt MM / DD / YYYY 03 / 31 / 2009 |
| | Mailing Address 11511 Brayton Drive C1 | Transaction ID: SA11AI.7893 |
| | City State Zip Code Anchorage AK 98516 | Amount of Each Receipt this Period 100.00 |
| | FEC ID number of contributing federal political committee. C | payroll deduction weekly |
| Name of Employer Horizon Lines | Occupation Director, operations | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 300.00 | |

| | | |
|---|---|---|
| B. | Full Name (Last, First, Middle Initial) Rich Kessler | Date of Receipt MM / DD / YYYY 03 / 31 / 2009 |
| | Mailing Address 3123 Overlook Circle | Transaction ID: SA11AI.7876 |
| | City State Zip Code Hilland Village TX 75077 | Amount of Each Receipt this Period 157.86 |
| | FEC ID number of contributing federal political committee. C | payroll deduction monthly |
| Name of Employer Horizon Services | Occupation Vice president | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 473.38 | |

| | | |
|---|---|---|
| C. | Full Name (Last, First, Middle Initial) Marv Labrador | Date of Receipt MM / DD / YYYY 03 / 31 / 2009 |
| | Mailing Address P.O. Box 8897 | Transaction ID: SA11AI.7875 |
| | City State Zip Code Tamuning GU 96931 | Amount of Each Receipt this Period 120.00 |
| | FEC ID number of contributing federal political committee. C | payroll deduction weekly |
| Name of Employer Horizon Lines | Occupation General Manager, Country Mgmt | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 360.00 | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 377.86 |
| 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 / 14 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Horizon Lines, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

| | | |
|---|---|---|
| A. | Full Name (Last, First, Middle Initial) Huei-Ning P Pee | Date of Receipt MM / DD / YYYY 03 / 31 / 2009 |
| | Mailing Address 1839 Darnell Circle | Transaction ID: SA11AI.7870 |
| | City State Zip Code Frisco TX 00007 | Amount of Each Receipt this Period 89.52 |
| | FEC ID number of contributing federal political committee. C | payroll deduction monthly |
| Name of Employer Horizon Lines | Occupation Manager Applications | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 268.56 | |

| | | |
|---|---|---|
| B. | Full Name (Last, First, Middle Initial) Charles G. Raymond | Date of Receipt MM / DD / YYYY 03 / 31 / 2009 |
| | Mailing Address 9015 Winged Bourne Rd | Transaction ID: SA11AI.7848 |
| | City State Zip Code Charlotte NC 28210 | Amount of Each Receipt this Period 533.33 |
| | FEC ID number of contributing federal political committee. C | payroll deduction monthly |
| Name of Employer Horizon Lines | Occupation President & CEO | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1599.99 | |

| | | |
|---|---|---|
| C. | Full Name (Last, First, Middle Initial) Sam Raymond | Date of Receipt MM / DD / YYYY 03 / 31 / 2009 |
| | Mailing Address 6143 Cedar Croft Drive | Transaction ID: SA11AI.7854 |
| | City State Zip Code Charlotte NC 28266 | Amount of Each Receipt this Period 85.83 |
| | FEC ID number of contributing federal political committee. C | payroll deduction monthly |
| Name of Employer Horizon Lines | Occupation Manager, Performance Monitoring | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 257.49 | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 708.68 |
| 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 / 14 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Horizon Lines, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

A.

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) Jose Rodriguez | | Date of Receipt MM / DD / YYYY 03 / 31 / 2009 |
| Mailing Address Alturas de Torrimar | | Transaction ID: SA11AI.7869 |
| City San Juan | State PR | Zip Code 00969 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 68.75 |
| Name of Employer Horizon Lines | Occupation General Manager, Sales | payroll deduction monthly |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 206.25 | |

B.

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) Robert Zuckerman | | Date of Receipt MM / DD / YYYY 03 / 31 / 2009 |
| Mailing Address 19233 Hidden Cove Lane | | Transaction ID: SA11AI.7851 |
| City Cornelius | State NC | Zip Code 28031 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 167.00 |
| Name of Employer Horizon Lines | Occupation VP Legal | payroll deduction monthly |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 501.00 | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 235.75 |
| TOTAL This Period (last page this line number only) | 1637.49 |

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 10 / 14

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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 Government Fund/Horizon Lines Associates Good Govt Fu

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) CITIZENS TO ELECT RICK LARSEN <hr/> Mailing Address PO Box 326 <hr/> City Everett State WA Zip Code 98206 Purpose of Disbursement <input type="text"/> Candidate Name <input type="text"/> Category/Type <input type="text"/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WA District: 02 | Transaction ID: SB23.7844 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9 |
| | Amount of Each Disbursement this Period <input type="text"/> 1500.00 |
| B. Full Name (Last, First, Middle Initial) FRIENDS OF MAZIE HIRONO <hr/> Mailing Address PO BOX 677 <hr/> City HONOLULU State HI Zip Code 96809 Purpose of Disbursement <input type="text"/> Candidate Name <input type="text"/> Category/Type <input type="text"/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: HI District: 02 | Transaction ID: SB23.7845 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9 |
| | Amount of Each Disbursement this Period <input type="text"/> 1000.00 |
| C. Full Name (Last, First, Middle Initial) PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN <hr/> Mailing Address PO BOX 3662 <hr/> City SEATTLE State WA Zip Code 98124 Purpose of Disbursement <input type="text"/> Candidate Name <input type="text"/> Category/Type <input type="text"/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WA District: 00 | Transaction ID: SB23.7843 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 9 |
| | Amount of Each Disbursement this Period <input type="text"/> 2500.00 |

| | |
|--|------------------------------|
| SUBTOTAL of Disbursements This Page (optional) | <input type="text"/> 5000.00 |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

Form/Schedule : **SB23**

Transaction ID : **SB23.7843**

This contribution appears to exceed the contribution limits. We are reviewing records to confirm that previous contributions have been accurately reported. If so, a refund will be promptly sought. If this reflects reporting errors on previous reports, they will be promptly amended. Thank you.

**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 12 / 14

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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 Government Fund/Horizon Lines Associates Good Govt Fu

A.

Full Name (Last, First, Middle Initial)
SESTAK FOR CONGRESS

Mailing Address P.O. Box 16

City State Zip Code
Media PA 19063

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: PA District: 07

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.7842

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

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 13 / 14

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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 Government Fund/Horizon Lines Associates Good Govt Fu

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 101 South Tryon Street

City State Zip Code
Charlotte NC 28255

Purpose of Disbursement
bank fees

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.7841

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2009

Amount of Each Disbursement this Period

147.35

SUBTOTAL of Disbursements This Page (optional)

147.35

TOTAL This Period (last page this line number only)

147.35

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Horizon Lines, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

| | | | |
|---|-------------|-------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor BSY Associates | | | Nature of Debt (Purpose): design, production of printed materials |
| Mailing Address 195 Fairfield Ave. Suite 4D | | | |
| City West Caldwell | State NJ | ZIP Code 07006 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: SD10.4121 | |
| -3770.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | -3770.00 | |

| | | | |
|---|-------------|-------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor BSY Associates | | | Nature of Debt (Purpose): design, production of printed materials |
| Mailing Address 195 Fairfield Ave. Suite 4D | | | |
| City West Caldwell | State NJ | ZIP Code 07006 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: SD10.4120 | |
| 3770.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 3770.00 | |

| | |
|--|------|
| 1) SUBTOTALS This Period This Page (optional)..... | 0.00 |
| 2) TOTALS This Period (last page this line number only)..... | 0.00 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | 0.00 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | 0.00 |