

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
 Check if different than previously reported. (ACC)
 WASHINGTON DC 20036

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:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input checked="" type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on _____ in the State of _____

(d) 30-Day **Post -Election** Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on _____ in the State of _____

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 03 17 2011

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

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

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="2009"/>		85980.58
(b) Cash on Hand at Beginning of Reporting Period	83353.48	
(c) Total Receipts (from Line 19)	2792.40	8973.63
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	86145.88	94954.21
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))	78498.53	78498.53
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:

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

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)	1637.49	3592.24
(ii) Unitemized	1154.91	5381.39
(iii) TOTAL (add Lines 11(a)(i) and (ii)	2792.40	8973.63
(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)	2792.40	8973.63
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))	2792.40	8973.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2792.40	8973.63

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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

FEC Form 3X (Rev. 02/2003)

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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)	2792.40	8973.63
34. Total Contribution Refunds (from Line 28(d))	0.00	10.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2792.40	8963.63
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

Michael Avara

Mailing Address 1218 Hillshire Meadow Drive

City State Zip Code
Matthews NC 28105

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

Name of Employer Occupation
Horizon Lines, LLC Sr VP, Finance & CFO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: SA11AI.7859

Amount of Each Receipt this Period

100.00

payroll deduction monthly

B.

Full Name (Last, First, Middle Initial)

Marvin Buchanan

Mailing Address 6012 E Mercer Way

City State Zip Code
Mercer Island WA 98040

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

Name of Employer Occupation
Horizon Lines Director, Marketing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 423.53

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: SA11AI.7866

Amount of Each Receipt this Period

145.00

payroll deduction monthly

C.

Full Name (Last, First, Middle Initial)

Erica Compton

Mailing Address 4838 Gurley Ave

City State Zip Code
Dallas TX 75223

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

Name of Employer Occupation
Horizon Lines Manager, Collections

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.60

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: SA11AI.7872

Amount of Each Receipt this Period

70.20

payroll deduction monthly

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"/> 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 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	

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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 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 75056	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 89.52
	Name of Employer Horizon Lines	Occupation Manager Applications	payroll deduction monthly
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	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 533.33
	Name of Employer Horizon Lines	Occupation President & CEO	payroll deduction monthly
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	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 85.83
	Name of Employer Horizon Lines	Occupation Manager, Performance Monitoring	payroll deduction monthly
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	

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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

Mailing Address ALTURAS DE TORRIMAR CALLE 7 #15-1

City State Zip Code
Guaynabo PR 00969

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

Name of Employer Occupation
Horizon Lines General Manager, Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
206.25

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.7869

Amount of Each Receipt this Period
68.75

payroll deduction monthly

B.

Full Name (Last, First, Middle Initial)
Robert Zuckerman

Mailing Address 19233 Hidden Cove Lane

City State Zip Code
Cornelius NC 28031

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

Name of Employer Occupation
Horizon Lines VP Legal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
501.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.7851

Amount of Each Receipt this Period
167.00

payroll deduction monthly

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)

<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 Government Fund/Horizon Lines Associates Good Govt Fu

A. CITIZENS TO ELECT RICK LARSEN

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 326

City Everett State WA Zip Code 98206

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: WA District: 02

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/Type

Transaction ID: SB23.7844

Date of Disbursement

03 / 11 / 2009

Amount of Each Disbursement this Period

1500.00

B. FRIENDS OF MAZIE HIRONO

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 677

City HONOLULU State HI Zip Code 96809

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: HI District: 02

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/Type

Transaction ID: SB23.7845

Date of Disbursement

03 / 11 / 2009

Amount of Each Disbursement this Period

1000.00

C. PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 3662

City SEATTLE State WA Zip Code 98124

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: WA District: 00

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/Type

Transaction ID: SB23.7843

Date of Disbursement

03 / 09 / 2009

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ►

5000.00

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

C. 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

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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

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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)

Bank of America

Mailing Address 101 Sout Tryon St

City State Zip Code
Charlotte NC 28253

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

/ /

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