

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 CITY STATE ZIPCODE

C00385179

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (b) Monthly Report Due On: Feb 20 (M2) X May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

- (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)

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 (12S)

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 04 01 2009 through 04 30 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	78498.53	
(c) Total Receipts (from Line 19)	4486.59	13460.22
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	82985.12	99440.80
7. Total Disbursements (from Line 31)	4203.47	20659.15
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	78781.65	78781.65
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**

FEC Form 3X (Rev. 06/2004)

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		
(i) Itemized (use Schedule A)	3490.04	7082.28
(ii) Unitemized	996.55	6377.94
(iii) TOTAL (add Lines 11(a)(i) and (ii)	4486.59	13460.22
(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)	4486.59	13460.22
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))	4486.59	13460.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4486.59	13460.22

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.....	4000.00	20000.00
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.....	203.47	649.15
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))..	4203.47	20659.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4203.47	20659.15

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	4486.59	13460.22
34. Total Contribution Refunds (from Line 28(d))	0.00	10.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4486.59	13450.22
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 / 15
	<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 04 / 30 / 2009
	Mailing Address 1218 Hillshire Meadow Drive	Transaction ID: SA11AI.7917
	City State Zip Code Matthews NC 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 ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) Charles Battiato	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address P.O. Box 894715	Transaction ID: SA11AI.7945
	City State Zip Code Mililani HI 96789	Amount of Each Receipt this Period 51.33
	FEC ID number of contributing federal political committee. C	payroll deduction monthly
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 ▼ 205.32	

C.	Full Name (Last, First, Middle Initial) Marvin Buchanan	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 6012 E Mercer Way	Transaction ID: SA11AI.7930
	City State Zip Code Mercer Island WA 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 ▼ 568.53	

SUBTOTAL of Receipts This Page (optional)	296.33
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 15
	<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) Erica Compton		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 4838 Gurley Ave		Transaction ID: SA11AI.7936
	City Dallas	State TX	Zip Code 75223
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.20
	Name of Employer Horizon Lines	Occupation Manager, Collections	payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.80	

B.	Full Name (Last, First, Middle Initial) Marion G. Davis		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 11511 Brayton Drive C1		Transaction ID: SA11AI.7957
	City Anchorage	State AK	Zip Code 98516
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
	Name of Employer Horizon Lines	Occupation Director, operations	payroll deduction weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 425.00	

C.	Full Name (Last, First, Middle Initial) Dan Downes		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 12956 Se 301st St		Transaction ID: SA11AI.7947
	City Auburn	State WA	Zip Code 98092
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 54.67
	Name of Employer Horizon Lines	Occupation Director, Marketing	payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 218.68	

SUBTOTAL of Receipts This Page (optional)	249.87
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 / 15
	<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) Lori A Galloway		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address P.O. Box 111393		Transaction ID: SA11AI.7949
	City Anchorage	State AK	Zip Code 99511
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
	Name of Employer Horizon Lines	Occupation Manager, Port Operations	payroll deduction weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 255.00	

B.	Full Name (Last, First, Middle Initial) Sabrina M Jackson		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 3106 Indian Trail Ct		Transaction ID: SA11AI.7929
	City Rowlett	State TX	Zip Code 75088
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 56.65
	Name of Employer Horizon Lines	Occupation OTC Documenting and Finance	payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 226.60	

C.	Full Name (Last, First, Middle Initial) John Keenan		Date of Receipt MM / DD / YYYY 04 / 06 / 2009
	Mailing Address 3030 Woodhollow Drive		Transaction ID: SA11AI.9063
	City Highland View	State TX	Zip Code 75077
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
	Name of Employer Horizon Lines	Occupation Senior VP , OPerations and COO	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1631.65
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 / 15
	<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) Rich Kessler	Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Mailing Address 3123 Overlook Circle	Transaction ID: SA11AI.7940
	City Hilland Village State TX Zip Code 75077	Amount of Each Receipt this Period 157.76
	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 ▼ 631.14	

B.	Full Name (Last, First, Middle Initial) Marv Labrador	Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Mailing Address P.O. Box 8897	Transaction ID: SA11AI.7939
	City Tamuning State GU Zip Code 96931	Amount of Each Receipt this Period 150.00
	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 ▼ 510.00	

C.	Full Name (Last, First, Middle Initial) Huei-Ning Pee	Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Mailing Address 1839 Darnell Circle	Transaction ID: SA11AI.7934
	City Frisco State TX Zip Code 75056	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 ▼ 358.08	

SUBTOTAL of Receipts This Page (optional)	397.28
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 / 15
	<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) Charles G. Raymond		Date of Receipt MM / DD / YYYY 04 / 30 / 2009		
	Mailing Address 9015 Winged Bourne Rd		Transaction ID: SA11AI.7905		
	City Charlotte	State NC	Zip Code 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	Aggregate Year-to-Date 2133.32		

B.	Full Name (Last, First, Middle Initial) Sam Raymond		Date of Receipt MM / DD / YYYY 04 / 30 / 2009		
	Mailing Address 6143 Cedar Croft Drive		Transaction ID: SA11AI.7912		
	City Charlotte	State NC	Zip Code 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	Aggregate Year-to-Date 343.32		

C.	Full Name (Last, First, Middle Initial) Jose Rodriguez		Date of Receipt MM / DD / YYYY 04 / 30 / 2009		
	Mailing Address ALTURAS DE TORRIMAR CALLE 7 #15-1		Transaction ID: SA11AI.7933		
	City Guaynabo	State PR	Zip Code 00969	Amount of Each Receipt this Period 68.75	
	FEC ID number of contributing federal political committee. C		payroll deduction monthly		
	Name of Employer Horizon Lines	Occupation General Manager, Sales	Aggregate Year-to-Date 275.00		

SUBTOTAL of Receipts This Page (optional)	687.91
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: PAGE 11 / 15
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Claudia Stone

Mailing Address 3 Atwood Avenue

City State Zip Code
Pompton Plains NJ 07444

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

Name of Employer Occupation
Horizon Lines Representative/ Temp/Misc

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2009

Transaction ID: SA11AI.7915

Amount of Each Receipt this Period
60.00

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 ▼ 668.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2009

Transaction ID: SA11AI.7908

Amount of Each Receipt this Period
167.00

payroll deduction monthly

SUBTOTAL of Receipts This Page (optional) ► 227.00

TOTAL This Period (last page this line number only) ► 3490.04

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)

PAGE 12 / 15

<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) ALASKANS FOR BEGICH	Transaction ID: SB23.7900
	Mailing Address PO BOX 240287	Date of Disbursement MM / DD / YYYY 04 / 06 / 2009
	City ANCHORAGE State AK Zip Code 99524	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) IKE SKELTON FOR CONGRESS COMMITTEE	Transaction ID: SB23.7903
	Mailing Address P.O. Box A	Date of Disbursement MM / DD / YYYY 04 / 15 / 2009
	City Harrisonville State MO Zip Code 64701	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) MICA FOR CONGRESS	Transaction ID: SB23.7901
	Mailing Address P. O. Box 181546	Date of Disbursement MM / DD / YYYY 04 / 14 / 2009
	City Casselberry State FL Zip Code 32718	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 15

<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)
SUE MYRICK FOR CONGRESS

Mailing Address P.O. Box 37091

City State Zip Code
Charlotte NC 28237

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: NC District: 09

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.7899

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2009

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

4000.00

**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 14 / 15

<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

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: SB29.7898

Date of Disbursement

/ /

Amount of Each Disbursement this Period

203.47

SUBTOTAL of Disbursements This Page (optional)

203.47

TOTAL This Period (last page this line number only)

203.47

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 / 15
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 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 State ZIP Code West Caldwell NJ 07006	

Outstanding Balance Beginning This Period -3770.00	Transaction ID: SD10.4121	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period -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 State ZIP Code West Caldwell NJ 07006	

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