

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

Horizon Lines LLC Associates Good Gov't Fund (Horizon Lines Associates Good Gov't Fund)

ADDRESS (number and street) 2001 K Street, NW, Suite 400 Attn: W. Farah WASHINGTON DC 20006 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C 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 Year-End Report (YE)
July 31 Mid-Year Report (Non-election Year Only) (MY)
Termination Report (TER)

- (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8) [checked], Sep 20 (M9), Oct 20 (M10), Nov 20 (M11) (Non-Election Year Only), Dec 20 (M12) (Non-Election Year Only), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

Election on MM/DD/YYYY in the State of

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on MM/DD/YYYY in the State of

5. Covering Period 07/01/2012 through 07/31/2012

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 Mark Blankenship [Electronically Filed] Date 08/09/2012

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

Table with 10 columns for Office Use Only.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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="2012"/>		46075.67
(b) Cash on Hand at Beginning of Reporting Period.....	31536.99	
(c) Total Receipts (from Line 19) .....	1256.03	8717.35
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	32793.02	54793.02
7. Total Disbursements (from Line 31).....	2500.00	24500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	30293.02	30293.02
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

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).....	1082.11	4556.40
(ii) Unitemized .....	173.92	4160.95
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1256.03	8717.35
(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) .....	1256.03	8717.35
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))..... ▶	1256.03	8717.35
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1256.03	8717.35

**DETAILED SUMMARY PAGE**

of Disbursements

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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	24500.00
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	24500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2500.00	24500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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<b>III. Net Contributions/Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	1256.03	8717.35
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1256.03	8717.35
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 16
<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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)**

Full Name (Last, First, Middle Initial)  
**A. Henry Bell**

Mailing Address 4701 Preston Park Blvd

City State Zip Code  
Plano TX 75093

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

Name of Employer Occupation  
Horizon Lines Financial Analyst Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
07 / 31 / 2012  
**Transaction ID : SA11Al.10571**

Amount of Each Receipt this Period  
50.00  
contribution

Full Name (Last, First, Middle Initial)  
**B. Thomas M Bellerud**

Mailing Address 3607 22nd St SE

City State Zip Code  
Puyallup WA 98374

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

Name of Employer Occupation  
Horizon Lines Outside Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  
07 / 31 / 2012  
**Transaction ID : SA11Al.10572**

Amount of Each Receipt this Period  
40.00  
contribution

Full Name (Last, First, Middle Initial)  
**C. Alfred Bozzuffi**

Mailing Address 159 Bergen Street

City State Zip Code  
Brooklyn NY 11217

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

Name of Employer Occupation  
Horizon Lines Naval Architect

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
322.79

Date of Receipt  
07 / 31 / 2012  
**Transaction ID : SA11Al.10574**

Amount of Each Receipt this Period  
47.81  
contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 137.81

**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 16
	<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)**

**A. Marvin Buchanan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6012 E Mercer Way  
City Mercer Island State WA Zip Code 98040  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Horizon Lines Occupation Director, Marketing  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **1035.90**

Date of Receipt **07 / 31 / 2012**  
**Transaction ID : SA11Al.10575**  
Amount of Each Receipt this Period **153.42**  
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 Director, operations  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **675.00**

Date of Receipt **07 / 05 / 2012**  
**Transaction ID : SA11Al.10537**  
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 Director, operations  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **700.00**

Date of Receipt **07 / 12 / 2012**  
**Transaction ID : SA11Al.10545**  
Amount of Each Receipt this Period **25.00**  
contribution

**SUBTOTAL** of Receipts This Page (optional)..... **203.42**  
**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 16
	<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. Marion G. Davis**

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 Director, operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **725.00**

Date of Receipt **07 / 19 / 2012**

**Transaction ID : SA11Al.10546**

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

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

Name of Employer Horizon Lines Occupation Director, operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **07 / 26 / 2012**

**Transaction ID : SA11Al.10547**

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

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

Name of Employer Horizon Lines Occupation Manager, Port Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **211.95**

Date of Receipt **07 / 05 / 2012**

**Transaction ID : SA11Al.10539**

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

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NAME OF COMMITTEE (In Full)  
**Horizon Lines LLC Associates Good Gov't Fund (Horizon Lines Associates Good Gov't Fund)**

Full Name (Last, First, Middle Initial) <b>A. Dwayne Fujitani</b>			Date of Receipt MM / DD / YYYY 07 / 12 / 2012 <b>Transaction ID : SA11AI.10551</b>
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 ▼ 219.88		

Full Name (Last, First, Middle Initial) <b>B. Dwayne Fujitani</b>			Date of Receipt MM / DD / YYYY 07 / 19 / 2012 <b>Transaction ID : SA11AI.10552</b>
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 ▼ 227.81		

Full Name (Last, First, Middle Initial) <b>C. Dwayne Fujitani</b>			Date of Receipt MM / DD / YYYY 07 / 26 / 2012 <b>Transaction ID : SA11AI.10553</b>
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 ▼ 235.74		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Horizon Lines LLC Associates Good Gov't Fund (Horizon Lines Associates Good Gov't Fund)**

Full Name (Last, First, Middle Initial) <b>A. Lori A Galloway</b>		Date of Receipt MM / DD / YYYY 07 / 05 / 2012 <b>Transaction ID : SA11Al.10540</b>
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 ▼ 405.00	

Full Name (Last, First, Middle Initial) <b>B. Lori A Galloway</b>		Date of Receipt MM / DD / YYYY 07 / 12 / 2012 <b>Transaction ID : SA11Al.10554</b>
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 ▼ 420.00	

Full Name (Last, First, Middle Initial) <b>C. Lori A Galloway</b>		Date of Receipt MM / DD / YYYY 07 / 19 / 2012 <b>Transaction ID : SA11Al.10555</b>
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 ▼ 435.00	

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

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

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

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NAME OF COMMITTEE (In Full)  
**Horizon Lines LLC Associates Good Gov't Fund (Horizon Lines Associates Good Gov't Fund)**

**A. Lori A Galloway**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 111393  
 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:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 26 / 2012  
**Transaction ID : SA11Al.10556**  
 Amount of Each Receipt this Period 15.00  
 contribution

**B. James Garrahan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 73 Paseo De Orguideas  
 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 ▼ 350.00

Date of Receipt 07 / 31 / 2012  
**Transaction ID : SA11Al.10576**  
 Amount of Each Receipt this Period 50.00  
 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 ▼ 270.00

Date of Receipt 07 / 05 / 2012  
**Transaction ID : SA11Al.10541**  
 Amount of Each Receipt this Period 10.00  
 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 12 OF 16
	<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) <b>A. Kenneth Gill</b>		Date of Receipt MM / DD / YYYY 07 / 12 / 2012 <b>Transaction ID : SA11Al.10557</b>
Mailing Address 2911 Leeward Place		Amount of Each Receipt this Period 10.00 contribution
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) <b>B. Kenneth Gill</b>		Date of Receipt MM / DD / YYYY 07 / 19 / 2012 <b>Transaction ID : SA11Al.10558</b>
Mailing Address 2911 Leeward Place		Amount of Each Receipt this Period 10.00 contribution
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Full Name (Last, First, Middle Initial) <b>C. Kenneth Gill</b>		Date of Receipt MM / DD / YYYY 07 / 26 / 2012 <b>Transaction ID : SA11Al.10559</b>
Mailing Address 2911 Leeward Place		Amount of Each Receipt this Period 10.00 contribution
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 16
	<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)**

**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 **398.53**

Date of Receipt **07 / 31 / 2012**  
**Transaction ID : SA11AI.10578**  
Amount of Each Receipt this Period **58.63**  
contribution

**B. Linda L Montgomery**  
Full Name (Last, First, Middle Initial)  
Mailing Address 157 Simmons Drive  
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  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **255.15**

Date of Receipt **07 / 31 / 2012**  
**Transaction ID : SA11AI.10580**  
Amount of Each Receipt this Period **36.45**  
contribution

**C. Janet Nieves**  
Full Name (Last, First, Middle Initial)  
Mailing Address Paseo Perla #207 Santa Barbara  
City Gurabo State PR Zip Code 00778  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Horizon Lines Occupation Safety and Security Manager  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **-120.00**

Date of Receipt **07 / 31 / 2012**  
**Transaction ID : SA11AI.10581**  
Amount of Each Receipt this Period **20.00**  
contribution

**SUBTOTAL** of Receipts This Page (optional)..... **115.08**  
**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 14 OF 16
	<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. Claudia Stone**

Mailing Address 3 Atwood Avenue

City Pompton Plains State NJ Zip Code 07444

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

Name of Employer Horizon Lines Occupation Representative/ Temp/Misc

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **422.50**

Date of Receipt **07 / 31 / 2012**

**Transaction ID : SA11Al.10586**

Amount of Each Receipt this Period **62.50**

contribution

Full Name (Last, First, Middle Initial)  
**B. Brian Taylor**

Mailing Address 150 Kaapuni Drive

City Kallua State HI Zip Code 96734

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

Name of Employer Horizon Lines Occupation VP Country Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **07 / 31 / 2012**

**Transaction ID : SA11Al.10587**

Amount of Each Receipt this Period **50.00**

contribution

Full Name (Last, First, Middle Initial)  
**C. Michael Zendan**

Mailing Address 943 Longfield Circle

City Charlotte State NC Zip Code 28270

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

Name of Employer Horizon Lines Occupation VP, Deputy General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **802.06**

Date of Receipt **07 / 31 / 2012**

**Transaction ID : SA11Al.10588**

Amount of Each Receipt this Period **114.58**

contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **227.08**

**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: PAGE 15 OF 16  
(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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)**

**A. Robert Zuckerman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19233 Hidden Cove Lane  
 City Cornelius State NC Zip Code 28031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Horizon Lines Occupation VP Legal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1169.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2012  
**Transaction ID : SA11AI.10589**  
 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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	167.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1082.11

# 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. HANABUSA FOR HAWAII

Mailing Address P.O. BOX 1416

City HONOLULU State HI Zip Code 96806

Purpose of Disbursement  
contribution primary election

Candidate Name

**COLLEEN WAKAKO HANABUSA**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: HI District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2012

**Transaction ID : SB23.10535**

Amount of Each Disbursement this Period

1000.00
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Full Name (Last, First, Middle Initial)

### B. HANABUSA FOR HAWAII

Mailing Address P.O. BOX 1416

City HONOLULU State HI Zip Code 96806

Purpose of Disbursement  
contribution general election

Candidate Name

**COLLEEN WAKAKO HANABUSA**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: HI District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2012

**Transaction ID : SB23.10536**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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
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2500.00
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