

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:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 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 (12G)
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 07 01 2009 through 07 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 08 20 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 **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"/>		78182.87
(b) Cash on Hand at Beginning of Reporting Period	65855.66	
(c) Total Receipts (from Line 19)	2942.47	20606.99
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	68798.13	98789.86
7. Total Disbursements (from Line 31)	189.18	30180.91
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	68608.95	68608.95
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		
(i) Itemized (use Schedule A)	2599.02	12864.93
(ii) Unitemized	343.45	7742.06
(iii) TOTAL (add Lines 11(a)(i) and (ii)	2942.47	20606.99
(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)	2942.47	20606.99
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))	2942.47	20606.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2942.47	20606.99

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.....	0.00	29000.00
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.....	189.18	1170.91
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))..	189.18	30180.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	189.18	30180.91

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)	2942.47	20606.99
34. Total Contribution Refunds (from Line 28(d))	0.00	10.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2942.47	20596.99
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 / 17
	<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 07 / 31 / 2009
	Mailing Address 1218 Hillshire Meadow Drive	Transaction ID: SA11AI.8099
	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 ▼ 700.00	

B.	Full Name (Last, First, Middle Initial) Charles Battiato	Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address P.O. Box 894715	Transaction ID: SA11AI.8126
	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 ▼ 359.31	

C.	Full Name (Last, First, Middle Initial) Henry Bell	Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 4701 Preston Park Blvd	Transaction ID: SA11AI.8129
	City State Zip Code Plano TX 75093	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	payroll deduction monthly
Name of Employer Horizon Lines	Occupation Financial Analyst Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	201.33
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 / 17
	<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) Thomas M Bellerud		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 3607 22nd St SE		Transaction ID: SA11AI.8124
	City Puyallup	State WA	Zip Code 98374
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
	Name of Employer Horizon Lines	Occupation Outside Sales	payroll deduction monthly

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00
---	------------------------------------

B.	Full Name (Last, First, Middle Initial) Mark Blankenship		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 3247 Windbluff Drive		Transaction ID: SA11AI.8103
	City Charlotte	State NC	Zip Code 28277
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
	Name of Employer Horizon Lines	Occupation VP, Controller	payroll deduction monthly

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
---	------------------------------------

C.	Full Name (Last, First, Middle Initial) Alfred Bozzuffi		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 159 Bergen Street		Transaction ID: SA11AI.8091
	City Brooklyn	State NY	Zip Code 11217
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.02
	Name of Employer Horizon Lines	Occupation Naval Architect	payroll deduction monthly

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 267.12
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SUBTOTAL of Receipts This Page (optional)	157.02
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 / 17
	<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)
Jeff Brennan

Mailing Address 47-432 Waihee Rd

City Kaneohe State HI Zip Code 96744-4951

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 ▼ 300.00

Date of Receipt: 07 / 30 / 2009
Transaction ID: SA11AI.8123
Amount of Each Receipt this Period: 50.00
payroll deduction weekly

B.

Full Name (Last, First, Middle Initial)
Marvin Buchanan

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 ▼ 1003.53

Date of Receipt: 07 / 31 / 2009
Transaction ID: SA11AI.8111
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 Dallas State TX Zip Code 75223

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

Name of Employer Horizon Lines Occupation Manager, Collections

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 491.40

Date of Receipt: 07 / 31 / 2009
Transaction ID: SA11AI.8117
Amount of Each Receipt this Period: 70.20
payroll deduction monthly

SUBTOTAL of Receipts This Page (optional) ▶ **265.20**

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 9 / 17
	<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) Marion G. Davis		Date of Receipt MM / DD / YYYY 07 / 30 / 2009
	Mailing Address 11511 Brayton Drive C1		Transaction ID: SA11AI.8138
	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 ▼ 650.00	

B.	Full Name (Last, First, Middle Initial) Dan Downes		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 12956 Se 301st St		Transaction ID: SA11AI.8128
	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 ▼ 382.69	

C.	Full Name (Last, First, Middle Initial) Dwayne Fujitani		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 1818a Aupuni St		Transaction ID: SA11AI.8130
	City Honolulu	State HI	Zip Code 96817
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 36.05
	Name of Employer Horizon Lines	Occupation Manager, Port Operations	payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 211.26	

SUBTOTAL of Receipts This Page (optional)	▶	215.72
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 / 17
<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) Lori A Galloway		Date of Receipt MM / DD / YYYY 07 / 30 / 2009
	Mailing Address P.O. Box 111393		Transaction ID: SA11AI.8133
	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 ▼ 450.00	

B.	Full Name (Last, First, Middle Initial) James Garrahan		Date of Receipt MM / DD / YYYY 07 / 30 / 2009
	Mailing Address 73 Paseo De Orguideas		Transaction ID: SA11AI.8089
	City Trujillo Alto	State PR	Zip Code 00976
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Horizon Lines		Occupation Manager, Sales	payroll deduction weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) Claudette Hilbun		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 1413 Swallow Circle		Transaction ID: SA11AI.8108
	City Lewisville	State TX	Zip Code 75077
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Horizon lines		Occupation Director, Finance and Accounting	payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	▶	155.00
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 11 / 17
<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) Paul F Hydock		Date of Receipt MM / DD / YYYY 07 / 30 / 2009
	Mailing Address 5890 Tarta Tropicana Condo		Transaction ID: SA11AI.8098
	City Carolina	State PR	Zip Code 00979
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.96
Name of Employer Horizon Lines		Occupation Director, Agency and Logistics	payroll deduction weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 244.72		

B.	Full Name (Last, First, Middle Initial) Sabrina M Jackson		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 3106 Indian Trail Ct		Transaction ID: SA11AI.8110
	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 ▼ 396.55		

C.	Full Name (Last, First, Middle Initial) Rich Kessler		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 3123 Overlook Circle		Transaction ID: SA11AI.8121
	City Hilland Village	State TX	Zip Code 75077
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 157.76
Name of Employer Horizon Services		Occupation Vice president	payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1104.42		

SUBTOTAL of Receipts This Page (optional)	▶	249.37
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 / 17
	<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)
Marv Labrador

Mailing Address P.O. Box 8897

City State Zip Code
Tamuning GU 96931

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

Name of Employer Occupation
Horizon Lines General Manager, Country Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 30 / 2009

Transaction ID: SA11AI.8120

Amount of Each Receipt this Period
150.00

payroll deduction weekly

B.

Full Name (Last, First, Middle Initial)
Linda L Montgomery

Mailing Address 157 Simmons Drive

City State Zip Code
Copell TX 75019

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

Name of Employer Occupation
Horizon Lines Manager, Outbound Documentation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.15

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2009

Transaction ID: SA11AI.8122

Amount of Each Receipt this Period
36.45

payroll deduction monthly

C.

Full Name (Last, First, Middle Initial)
Janet Nieves

Mailing Address Paseo Perla #207
Santa Barbara

City State Zip Code
Gurabo PR 00778

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

Name of Employer Occupation
Horizon Lines Safety and Security Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2009

Transaction ID: SA11AI.8131

Amount of Each Receipt this Period
20.00

payroll deduction monthly

SUBTOTAL of Receipts This Page (optional) ► **206.45**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 17
	<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) Huei-Ning P Pee		Date of Receipt
	Mailing Address 1839 Darnell Circle		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Frisco	TX	00007
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Horizon Lines		Occupation Manager Applications	Transaction ID: SA11AI.8115
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="626.64"/>	<input type="text" value="89.52"/>
payroll deduction monthly			

B.	Full Name (Last, First, Middle Initial) Charles G. Raymond		Date of Receipt
	Mailing Address 9015 Winged Bourne Rd		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Charlotte	NC	28210
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Horizon Lines		Occupation President & CEO	Transaction ID: SA11AI.8085
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="3733.31"/>	<input type="text" value="533.33"/>
payroll deduction monthly			

C.	Full Name (Last, First, Middle Initial) Sam Raymond		Date of Receipt
	Mailing Address 6143 Cedar Croft Drive		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Charlotte	NC	28266
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Horizon Lines		Occupation Manager, Performance Monitoring	Transaction ID: SA11AI.8093
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="600.81"/>	<input type="text" value="85.83"/>
payroll deduction monthly			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="708.68"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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 / 17
	<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) Dave Rodger		Date of Receipt
	Mailing Address 149 Blauvelt Ave		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Ho Ho Kus	NJ	07423
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8094
Name of Employer Horizon Lines		Occupation Director, Technical Services	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 294.00	<input type="text" value="42.00"/>
			payroll deduction monthly

B.	Full Name (Last, First, Middle Initial) Jose Rodriguez		Date of Receipt
	Mailing Address Alturas de Torrimar		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	San Juan	PR	00969
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8114
Name of Employer Horizon Lines		Occupation General Manager, Sales	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 481.25	<input type="text" value="68.75"/>
			payroll deduction monthly

C.	Full Name (Last, First, Middle Initial) Claudia Stone		Date of Receipt
	Mailing Address 3 Atwood Avenue		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Pompton Plains	NJ	07444
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8097
Name of Employer Horizon Lines		Occupation Assistant General Counsel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 420.00	<input type="text" value="60.00"/>
			payroll deduction monthly

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="170.75"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 17
	<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) Brian Taylor		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 150 Kaapuni Drive		Transaction ID: SA11AI.8132
	City Kallua	State HI	Zip Code 96734
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer Horizon Lines	Occupation VP Country Management	payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) Duncan Wright		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 5411 Vanderbilt Avenue		Transaction ID: SA11AI.8104
	City Dallas	State TX	Zip Code 75206
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 52.50
	Name of Employer Horizon Lines	Occupation Manager, Marketing	payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 348.10	

C.	Full Name (Last, First, Middle Initial) Robert Zuckerman		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 19233 Hidden Cove Lane		Transaction ID: SA11AI.8088
	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 ▼ 1169.00	

SUBTOTAL of Receipts This Page (optional)	269.50
TOTAL This Period (last page this line number only)	2599.02

**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 16 / 17

<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 South Tryon Street

City State Zip Code
Charlotte NC 28255

Purpose of Disbursement
bank fees deducted

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.8083

Date of Disbursement

07 / 15 / 2009

Amount of Each Disbursement this Period

189.18

SUBTOTAL of Disbursements This Page (optional)

189.18

TOTAL This Period (last page this line number only)

189.18

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 17 / 17
	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