

# 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 (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 06 01 2010 through 06 30 2010

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 **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="2010"/>		77975.29
(b) Cash on Hand at Beginning of Reporting Period .....	81654.79	
(c) Total Receipts (from Line 19) .....	2608.49	19287.99
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	84263.28	97263.28
7. Total Disbursements (from Line 31) .....	9300.00	22300.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	74963.28	74963.28
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 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) .....	2282.49	12679.04
(ii) Unitemized .....	326.00	6608.95
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	2608.49	19287.99
(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) .....	2608.49	19287.99
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)) .....	2608.49	19287.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2608.49	19287.99

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	9300.00	22300.00
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	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) 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))..	9300.00	22300.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9300.00	22300.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	2608.49	19287.99
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2608.49	19287.99
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: PAGE 6 / 18  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

**A.** Full Name (Last, First, Middle Initial)  
Michael Avara

Mailing Address 1218 Hillshire Meadow Drive

City State Zip Code  
Matthews NC 28105

FEC ID number of contributing federal political committee. C

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

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2010  
**Transaction ID:** SA11AI.8711  
 Amount of Each Receipt this Period 100.00  
 payroll deduction monthly

**B.** Full Name (Last, First, Middle Initial)  
Charles Battiato

Mailing Address P.O. Box 894715

City State Zip Code  
Mililani HI 96789

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Horizon Lines Manager, Sales

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 307.98

Date of Receipt 06 / 30 / 2010  
**Transaction ID:** SA11AI.8732  
 Amount of Each Receipt this Period 51.33  
 payroll deduction monthly

**C.** Full Name (Last, First, Middle Initial)  
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 ▼ 300.00

Date of Receipt 06 / 30 / 2010  
**Transaction ID:** SA11AI.8734  
 Amount of Each Receipt this Period 50.00  
 payroll deduction monthly

**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 / 18
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas M Bellerud		Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 3607 22nd St SE		<b>Transaction ID:</b> SA11AI.8730
	City Puyallup	State WA	Zip Code 98374
	FEC ID number of contributing federal political committee. <b>C</b>		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 ▼ 240.00
---	------------------------------------

<b>B.</b>	Full Name (Last, First, Middle Initial) Mark Blankenship		Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 3247 Windbluff Drive		<b>Transaction ID:</b> SA11AI.8714
	City Charlotte	State NC	Zip Code 28277
	FEC ID number of contributing federal political committee. <b>C</b>		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 ▼ 450.00
---	------------------------------------

<b>C.</b>	Full Name (Last, First, Middle Initial) Alfred Bozzuffi		Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 159 Bergen Street		<b>Transaction ID:</b> SA11AI.8705
	City Brooklyn	State NY	Zip Code 11217
	FEC ID number of contributing federal political committee. <b>C</b>		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 ▼ 252.12
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>157.02</b>
<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 8 / 18
	<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)  
Marvin Buchanan

Mailing Address 6012 E Mercer Way

City State Zip Code  
Mercer Island WA 98040

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

Name of Employer Occupation  
Horizon Lines Director, Marketing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
882.48

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2010

**Transaction ID:** SA11AI.8720

Amount of Each Receipt this Period  
147.08

payroll deduction monthly

**B.**

Full Name (Last, First, Middle Initial)  
Erica Compton

Mailing Address 4838 Gurley Ave

City State Zip Code  
Dallas TX 75223

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

Name of Employer Occupation  
Horizon Lines Manager, Collections

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
421.20

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2010

**Transaction ID:** SA11AI.8725

Amount of Each Receipt this Period  
70.20

payroll deduction monthly

**C.**

Full Name (Last, First, Middle Initial)  
Marion G. Davis

Mailing Address 11511 Brayton Drive C1

City State Zip Code  
Anchorage AK 98516

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

Name of Employer Occupation  
Horizon Lines Director, operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
625.00

Date of Receipt  
MM / DD / YYYY  
06 / 24 / 2010

**Transaction ID:** SA11AI.8741

Amount of Each Receipt this Period  
100.00

payroll deduction weekly

**SUBTOTAL** of Receipts This Page (optional) ..... ► **317.28**

**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 9 / 18
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Lori A Galloway		Date of Receipt MM / DD / YYYY 06 / 24 / 2010
	Mailing Address P.O. Box 111393		<b>Transaction ID:</b> SA11AI.8735
	City Anchorage	State AK	Zip Code 99511
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 60.00
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 ▼ 375.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) James Garrahan		Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 73 Paseo De Orguideas		<b>Transaction ID:</b> SA11AI.8704
	City Trujillo Alto	State PR	Zip Code 00976
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Horizon Lines		Occupation Manager, Sales	payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kenneth Gill		Date of Receipt MM / DD / YYYY 06 / 24 / 2010
	Mailing Address 2911 Leeward Place		<b>Transaction ID:</b> SA11AI.8698
	City Anchorage	State AK	Zip Code 99516
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 40.00
Name of Employer Horizon Lines		Occupation Manager, Business Processes	payroll deduction weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<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 10 / 18
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Paul F Hydock	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 5890 Tarta Tropicana Condo	<b>Transaction ID:</b> SA11AI.8710
	City State Zip Code Carolina PR 00979	Amount of Each Receipt this Period 34.96
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction monthly
	Name of Employer Occupation Horizon Lines Director, Agency and Logistics	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.76	

<b>B.</b>	Full Name (Last, First, Middle Initial) Sabrina M Jackson	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 3106 Indian Trail Ct	<b>Transaction ID:</b> SA11AI.8719
	City State Zip Code Rowlett TX 75088	Amount of Each Receipt this Period 56.65
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction monthly
	Name of Employer Occupation Horizon Lines OTC Documenting and Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 339.90	

<b>C.</b>	Full Name (Last, First, Middle Initial) Marv Labrador	Date of Receipt MM / DD / YYYY 06 / 24 / 2010
	Mailing Address P.O. Box 8897	<b>Transaction ID:</b> SA11AI.8728
	City State Zip Code Tamuning GU 96931	Amount of Each Receipt this Period 129.24
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction weekly
	Name of Employer Occupation Horizon Lines General Manager, Country Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 807.75	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>220.85</b>
<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 / 18
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Linda L Montgomery		Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 157 Simmons Drive		<b>Transaction ID:</b> SA11AI.8729
	City Copell	State TX	Zip Code 75019
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 36.45
	Name of Employer Horizon Lines		Occupation Manager, Outbound Documentation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 218.70	payroll deduction monthly

<b>B.</b>	Full Name (Last, First, Middle Initial) Huei-Ning Pee		Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 1839 Darnell Circle		<b>Transaction ID:</b> SA11AI.8723
	City Frisco	State TX	Zip Code 75056
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 89.52
	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 ▼ 537.12	payroll deduction monthly

<b>C.</b>	Full Name (Last, First, Middle Initial) Charles G. Raymond		Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 9015 Winged Bourne Rd		<b>Transaction ID:</b> SA11AI.8699
	City Charlotte	State NC	Zip Code 28210
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 554.17
	Name of Employer Horizon Lines		Occupation President & CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3325.02	payroll deduction monthly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>680.14</b>
<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 12 / 18
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Dave Rodger		Date of Receipt
	Mailing Address 149 Blauvelt Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 30 / 2010
	City	State	Zip Code
	Ho Ho Kus	NJ	07423
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8707
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 ▼ 252.00	<input type="text"/> 42.00
			payroll deduction monthly

<b>B.</b>	Full Name (Last, First, Middle Initial) Jose Rodriguez		Date of Receipt
	Mailing Address ALTURAS DE TORRIMAR CALLE 7 #15-1		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 30 / 2010
	City	State	Zip Code
	Guaynabo	PR	00969
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8722
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 ▼ 418.74	<input type="text"/> 69.79
			payroll deduction monthly

<b>C.</b>	Full Name (Last, First, Middle Initial) Claudia Stone		Date of Receipt
	Mailing Address 3 Atwood Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 30 / 2010
	City	State	Zip Code
	Pompton Plains	NJ	07444
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8709
Name of Employer Horizon Lines		Occupation Representative/ Temp/Misc	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 ▼ 360.00	<input type="text"/> 60.00
			payroll deduction monthly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 171.79
<b>TOTAL</b> 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 13 / 18
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Brian Taylor		Date of Receipt
	Mailing Address 150 Kaapuni Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 30 / 2010
	City	State	Zip Code
	Kallua	HI	96734
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8742
Name of Employer Horizon Lines		Occupation VP Country Management	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 ▼ 300.00	<input type="text"/> 50.00
			payroll deduction monthly

<b>B.</b>	Full Name (Last, First, Middle Initial) Duncan Wright		Date of Receipt
	Mailing Address 5411 Vanderbilt Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 30 / 2010
	City	State	Zip Code
	Dallas	TX	75206
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8715
Name of Employer Horizon Lines		Occupation Manager, Marketing	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 ▼ 315.00	<input type="text"/> 52.50
			payroll deduction monthly

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael, Zendan		Date of Receipt
	Mailing Address 943 Longfield Circle		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 30 / 2010
	City	State	Zip Code
	Charlotte	NC	28270
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8701
Name of Employer Horizon Lines		Occupation VP, Deputy 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 ▼ 687.48	<input type="text"/> 114.58
			payroll deduction monthly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> <b>217.08</b>
<b>TOTAL</b> 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:		PAGE 14 / 18	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert Zuckerman		Date of Receipt		
	Mailing Address 19233 Hidden Cove Lane		M M / D D / Y Y Y Y 06 / 30 / 2010		
	City Cornelius	State NC	Zip Code 28031	<b>Transaction ID:</b> SA11AI.8703	
	FEC ID number of contributing federal political committee. <b>C</b>		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 ▼ 1002.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	167.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2282.49

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.	Full Name (Last, First, Middle Initial) <b>BENNET FOR COLORADO</b>	<b>Transaction ID:</b> SB23.8696
	Mailing Address <b>PO BOX 3078</b>	Date of Disbursement 06 / 17 / 2010
	City <b>DENVER</b> State <b>CO</b> Zip Code <b>80201</b>	Amount of Each Disbursement this Period 4800.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>CO</b> District: <b>00</b>	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) <b>NORM DICKS FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.8692
	Mailing Address <b>PO Box 1663</b>	Date of Disbursement 06 / 02 / 2010
	City <b>Tacoma</b> State <b>WA</b> Zip Code <b>98401</b>	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: <b>WA</b> District: <b>06</b>	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) <b>PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN</b>	<b>Transaction ID:</b> SB23.8690
	Mailing Address <b>PO BOX 3662</b>	Date of Disbursement 06 / 02 / 2010
	City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98124</b>	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: <b>WA</b> District: <b>00</b>	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**6800.00**

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

C. Form/Schedule : **SB23**  
Transaction ID : **SB23.8690**

This contribution has been flagged as exceeding contribution limits. We will confirm as soon as possible whether this is correct and if appropriate request a refund promptly from the campaign committee.



**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 17 / 18

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

SESTAK FOR SENATE

Mailing Address PO BOX 1936

City MEDIA State PA Zip Code 19063

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: PA District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: SB23.8694

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	1	0

Amount of Each Disbursement this Period

2500.00
---------

SUBTOTAL of Disbursements This Page (optional) ..... ►

2500.00

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

9300.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 18 / 18
	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

<b>A.</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	<b>Transaction ID: SD10.4121</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period -3770.00

<b>B.</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	<b>Transaction ID: SD10.4120</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3770.00

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