

**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:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		68667.43
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	46617.38									
(c) Total Receipts (from Line 19)	3780.64	31030.59								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	50398.02	99698.02								
7. Total Disbursements (from Line 31)	56.65	49356.65								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	50341.37	50341.37								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

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

Report Covering the Period: From: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	3608.64	23079.55
(ii) Unitemized	172.00	7951.04
(iii) TOTAL (add Lines 11(a)(i) and (ii)	3780.64	31030.59
(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)	3780.64	31030.59
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))	3780.64	31030.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3780.64	31030.59

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.....	56.65	56.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	56.65	56.65
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	49300.00
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))..	56.65	49356.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	56.65	49356.65

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	3780.64	31030.59
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3780.64	31030.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	56.65	56.65
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	56.65	56.65

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 / 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

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 12 / 30 / 2010
	Mailing Address 1218 Hillshire Meadow Drive	Transaction ID: SA11AI.8980
	City State Zip Code Matthews NC 28105	Amount of Each Receipt this Period 200.00
	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 ▼ 1200.00	

B.	Full Name (Last, First, Middle Initial) Charles Battiatto	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address P.O. Box 894715	Transaction ID: SA11AI.9000
	City State Zip Code Mililani HI 96789	Amount of Each Receipt this Period 102.66
	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 ▼ 615.96	

C.	Full Name (Last, First, Middle Initial) Henry Bell	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 4701 Preston Park Blvd	Transaction ID: SA11AI.9002
	City State Zip Code Plano TX 75093	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	Occupation Financial Analyst Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	402.66
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"/> 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 12 / 30 / 2010
	Mailing Address 3607 22nd St SE		Transaction ID: SA11AI.8998
	City Puyallup	State WA	Zip Code 98374
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
	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 ▼ 480.00	

B.	Full Name (Last, First, Middle Initial) Alfred Bozzuffi		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 159 Bergen Street		Transaction ID: SA11AI.8974
	City Brooklyn	State NY	Zip Code 11217
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 91.66
	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 ▼ 530.38	

C.	Full Name (Last, First, Middle Initial) Marvin Buchanan		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 6012 E Mercer Way		Transaction ID: SA11AI.8988
	City Mercer Island	State WA	Zip Code 98040
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 294.16
	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 ▼ 1764.96	

SUBTOTAL of Receipts This Page (optional)	▶	465.82
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 / 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

A.	Full Name (Last, First, Middle Initial) Kenneth K Chu		Date of Receipt
	Mailing Address 1604 Woodcutter Court		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Anchorage	AK	99507
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9004
Name of Employer Horizon Lines		Occupation SHift Manager	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 ▼ <input type="text" value="260.00"/>	<input type="text" value="30.00"/>
			payroll deduction weekly

B.	Full Name (Last, First, Middle Initial) Erica Compton		Date of Receipt
	Mailing Address 4838 Gurley Ave		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Dallas	TX	75223
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8992
Name of Employer Horizon Lines		Occupation Manager, Collections	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 ▼ <input type="text" value="842.40"/>	<input type="text" value="140.40"/>
			payroll deduction monthly

C.	Full Name (Last, First, Middle Initial) Marion G. Davis		Date of Receipt
	Mailing Address 11511 Brayton Drive C1		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Anchorage	AK	98516
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9009
Name of Employer Horizon Lines		Occupation Director, operations	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 ▼ <input type="text" value="1300.00"/>	<input type="text" value="150.00"/>
			payroll deduction weekly

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="320.40"/>
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 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

A.	Full Name (Last, First, Middle Initial) Dwayne Fujitani		Date of Receipt MM / DD / YYYY 12 / 30 / 2010		
	Mailing Address 1818a Aupuni St		Transaction ID: SA11AI.9008		
	City Honolulu	State HI	Zip Code 96817	Amount of Each Receipt this Period 43.26	
	FEC ID number of contributing federal political committee. C		payroll deduction weekly		
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 ▼ 374.92			

B.	Full Name (Last, First, Middle Initial) Lori A Galloway		Date of Receipt MM / DD / YYYY 12 / 30 / 2010		
	Mailing Address P.O. Box 111393		Transaction ID: SA11AI.9003		
	City Anchorage	State AK	Zip Code 99511	Amount of Each Receipt this Period 90.00	
	FEC ID number of contributing federal political committee. C		payroll deduction weekly		
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 ▼ 780.00			

C.	Full Name (Last, First, Middle Initial) James Garrahan		Date of Receipt MM / DD / YYYY 12 / 30 / 2010		
	Mailing Address 73 Paseo De Orguideas		Transaction ID: SA11AI.8973		
	City Trujillo Alto	State PR	Zip Code 00976	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		Occupation Manager, Sales			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

SUBTOTAL of Receipts This Page (optional)	233.26
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 / 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) Kenneth Gill		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 2911 Leeward Place		Transaction ID: SA11AI.8968
	City Anchorage	State AK	Zip Code 99516
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
	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 ▼ 520.00	payroll deduction weekly

B.	Full Name (Last, First, Middle Initial) Claudette Hilbun		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 1413 Swallow Circle		Transaction ID: SA11AI.8986
	City Lewisville	State TX	Zip Code 75077
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
	Name of Employer Horizon lines		Occupation Director, Finance and Accounting
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	payroll deduction monthly

C.	Full Name (Last, First, Middle Initial) Gunther Hoock		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 7804 Clark Springs Drive		Transaction ID: SA11AI.8985
	City Plano	State TX	Zip Code 75025
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
	Name of Employer Horizon Lines		Occupation Director Operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	payroll deduction monthly

SUBTOTAL of Receipts This Page (optional)	▶	160.00
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 / 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

A.	Full Name (Last, First, Middle Initial) Paul F Hydock	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 5890 Tarta Tropicana Condo	Transaction ID: SA11AI.8979
	City State Zip Code Carolina PR 00979	Amount of Each Receipt this Period 34.96
	FEC ID number of contributing federal political committee. C	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 ▼ 384.56	

B.	Full Name (Last, First, Middle Initial) Sabrina M Jackson	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 3106 Indian Trail Ct	Transaction ID: SA11AI.8987
	City State Zip Code Rowlett TX 75088	Amount of Each Receipt this Period 113.30
	FEC ID number of contributing federal political committee. C	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 ▼ 679.80	

C.	Full Name (Last, First, Middle Initial) Lana I Kanaha	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 837 Kealahou St	Transaction ID: SA11AI.9005
	City State Zip Code Honolulu HI 96825	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	payroll deduction weekly
	Name of Employer Occupation Horizon Lines Supervisor, Port operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	178.26
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 / 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

A.	Full Name (Last, First, Middle Initial) Marv Labrador	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address P.O. Box 8897	Transaction ID: SA11AI.8996
	City State Zip Code Tamuning GU 96931	Amount of Each Receipt this Period 193.86
	FEC ID number of contributing federal political committee. C	payroll deduction weekly
Name of Employer Horizon Lines	Occupation General Manager, Country Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1680.12	

B.	Full Name (Last, First, Middle Initial) Robert Loya	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 6809 E. Wardlow Road	Transaction ID: SA11AI.9001
	City State Zip Code Long Beach CA 90808	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	payroll deduction monthly
Name of Employer Horizon Lines	Occupation Manager, Terminal Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Linda L Montgomery	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 157 Simmons Drive	Transaction ID: SA11AI.8997
	City State Zip Code Copell TX 75019	Amount of Each Receipt this Period 72.90
	FEC ID number of contributing federal political committee. C	payroll deduction monthly
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 ▼ 437.40	

SUBTOTAL of Receipts This Page (optional)	306.76
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 / 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

A.	Full Name (Last, First, Middle Initial) Anita M. Olson		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 1724 Tawakoni Lane		Transaction ID: SA11AI.8991
	City Plano	State TX	Zip Code 75075
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer Horizon Lines	Occupation Manager, operations	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.	Full Name (Last, First, Middle Initial) Anthony Pagud		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 95-359 Lonomea Street		Transaction ID: SA11AI.9006
	City Mililani	State HI	Zip Code 96789
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.74
	Name of Employer Horizon Lines	Occupation Container Yard/Auto Supervisor	payroll deduction weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 223.08	

C.	Full Name (Last, First, Middle Initial) Leslie Peters		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 21 Shippen Court		Transaction ID: SA11AI.8995
	City Flemington	State NJ	Zip Code 08822
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Horizon Lines	Occupation Regional Sales, International	payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional)	325.74
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 / 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) Steve Powers		Date of Receipt
	Mailing Address 1805 Red Rock Drive		<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
	City	State	Zip Code
	McKinney	TX	75075
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8984
Name of Employer Horizon Lines		Occupation Manager, Equipment	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 ▼ 240.00	<input type="text"/> 40.00
			payroll deduction monthly

B.	Full Name (Last, First, Middle Initial) Billy D Pritchett		Date of Receipt
	Mailing Address 4121 Engleman St		<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
	City	State	Zip Code
	Fort Worth	TX	76137
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8994
Name of Employer Horizon Lines		Occupation Financial Analyst	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 ▼ 204.00	<input type="text"/> 34.00
			payroll deduction monthly

C.	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
	City	State	Zip Code
	Ho Ho Kus	NJ	07423
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8976
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 ▼ 504.00	<input type="text"/> 84.00
			payroll deduction monthly

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 158.00
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 / 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) Jose Rodriguez	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address ALTURAS DE TORRIMAR CALLE 7 #15-1	Transaction ID: SA11AI.8990
	City State Zip Code Guaynabo PR 00969	Amount of Each Receipt this Period 139.58
	FEC ID number of contributing federal political committee. C	payroll deduction monthly
Name of Employer Horizon Lines	Occupation General Manager, Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 767.69	

B.	Full Name (Last, First, Middle Initial) Frank Roznerski	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 95-40 Haalohi St	Transaction ID: SA11AI.9007
	City State Zip Code Mililani HI 06789	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	payroll deduction weekly
Name of Employer Horizon Lines	Occupation Safety Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) Claudia Stone	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 3 Atwood Avenue	Transaction ID: SA11AI.8978
	City State Zip Code Pompton Plains NJ 07444	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	payroll deduction monthly
Name of Employer Horizon Lines	Occupation Representative/ Temp/Misc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	

SUBTOTAL of Receipts This Page (optional)	289.58
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 16 / 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) Brian Taylor		Date of Receipt
	Mailing Address 150 Kaapuni Drive		<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
	City	State	Zip Code
	Kallua	HI	96734
	FEC ID number of contributing federal political committee.		C <input type="text"/>
Name of Employer Horizon Lines		Occupation VP Country Management	Transaction ID: SA11AI.9010
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"/> 600.00	<input type="text"/> 100.00
payroll deduction monthly			

B.	Full Name (Last, First, Middle Initial) Duncan Wright		Date of Receipt
	Mailing Address 5411 Vanderbilt 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
	City	State	Zip Code
	Dallas	TX	75206
	FEC ID number of contributing federal political committee.		C <input type="text"/>
Name of Employer Horizon Lines		Occupation Manager, Marketing	Transaction ID: SA11AI.8983
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"/> 630.00	<input type="text"/> 105.00
payroll deduction monthly			

C.	Full Name (Last, First, Middle Initial) Michael, Zendan		Date of Receipt
	Mailing Address 943 Longfield Circle		<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
	City	State	Zip Code
	Charlotte	NC	28270
	FEC ID number of contributing federal political committee.		C <input type="text"/>
Name of Employer Horizon Lines		Occupation VP, Deputy General Counsel	Transaction ID: SA11AI.8970
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"/> 1374.96	<input type="text"/> 229.16
payroll deduciton monthly			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 434.16
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:		PAGE 17 / 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

A.	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 1 2 / 3 0 / 2 0 1 0		
	City Cornelius	State NC	Zip Code 28031	Transaction ID: SA11AI.8972	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 334.00		
	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 ▼ 2004.00			

SUBTOTAL of Receipts This Page (optional)	334.00
TOTAL This Period (last page this line number only)	3608.64

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

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