

# 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 10 01 2009 through 10 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 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="2009"/>		85980.58
(b) Cash on Hand at Beginning of Reporting Period .....	77449.42	
(c) Total Receipts (from Line 19) .....	2718.75	30703.02
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	80168.17	116683.60
7. Total Disbursements (from Line 31) .....	2687.61	39203.04
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	77480.56	77480.56
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

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: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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) .....	2510.30	22045.87
(ii) Unitemized .....	208.45	8657.15
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	2718.75	30703.02
(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) .....	2718.75	30703.02
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)) .....	2718.75	30703.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2718.75	30703.02

**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.....	187.61	355.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	187.61	355.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	37500.00
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.....	0.00	1337.23
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))..	2687.61	39203.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2687.61	39203.04

**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) .....	2718.75	30703.02
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	10.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2718.75	30693.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	187.61	355.81
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	187.61	355.81

**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 / 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael Avara	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 1218 Hillshire Meadow Drive	<b>Transaction ID:</b> SA11AI.8277
	City State Zip Code Matthews NC 28105	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	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 ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Charles Battiatto	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address P.O. Box 894715	<b>Transaction ID:</b> SA11AI.8302
	City State Zip Code Mililani HI 96789	Amount of Each Receipt this Period 51.33
	FEC ID number of contributing federal political committee. <b>C</b>	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 ▼ 513.30	

<b>C.</b>	Full Name (Last, First, Middle Initial) Henry Bell	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 4701 Preston Park Blvd	<b>Transaction ID:</b> SA11AI.8305
	City State Zip Code Plano TX 75093	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	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 ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>201.33</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 7 / 20
	<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) Thomas M Bellerud	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 3607 22nd St SE	<b>Transaction ID:</b> SA11AI.8300
	City Puyallup State WA Zip Code 98374	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction monthly
	Name of Employer Horizon Lines Occupation Outside Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mark Blankenship	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 3247 Windbluff Drive	<b>Transaction ID:</b> SA11AI.8280
	City Charlotte State NC Zip Code 28277	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction monthly
	Name of Employer Horizon Lines Occupation VP, Controller Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Alfred Bozzuffi	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 159 Bergen Street	<b>Transaction ID:</b> SA11AI.8270
	City Brooklyn State NY Zip Code 11217	Amount of Each Receipt this Period 42.02
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction monthly
	Name of Employer Horizon Lines Occupation Naval Architect Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.20	

<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 / 20
	<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) Jeff Brennan		Date of Receipt
	Mailing Address 47-432 Waihee Rd		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Kaneohe	HI	96744-4951
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	<b>Transaction ID:</b> SA11AI.8299
Name of Employer Horizon Lines		Occupation Manager, Port 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="50.00"/>
		<input type="text" value="430.00"/>	payroll deduction weekly

<b>B.</b>	Full Name (Last, First, Middle Initial) Marvin Buchanan		Date of Receipt
	Mailing Address 6012 E Mercer Way		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Mercer Island	WA	98040
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	<b>Transaction ID:</b> SA11AI.8286
Name of Employer Horizon Lines		Occupation Director, 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 ▼	<input type="text" value="145.00"/>
		<input type="text" value="1438.53"/>	payroll deduction monthly

<b>C.</b>	Full Name (Last, First, Middle Initial) Kenneth K Chu		Date of Receipt
	Mailing Address 1604 Woodcutter Court		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Anchorage	AK	99507
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	<b>Transaction ID:</b> SA11AI.8308
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="25.00"/>
		<input type="text" value="215.00"/>	payroll deduction weekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="220.00"/>
<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 9 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.**

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

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 ▼  
702.00

Date of Receipt  
MM / DD / YYYY  
10 / 26 / 2009

**Transaction ID:** SA11AI.8293

Amount of Each Receipt this Period  
70.20

payroll deduction monthly

**B.**

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 ▼  
1100.00

Date of Receipt  
MM / DD / YYYY  
10 / 29 / 2009

**Transaction ID:** SA11AI.8313

Amount of Each Receipt this Period  
125.00

payroll deduction weekly

**C.**

Full Name (Last, First, Middle Initial)  
Dan Downes

Mailing Address 12956 Se 301st St

City State Zip Code  
Auburn WA 98092

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 ▼  
546.70

Date of Receipt  
MM / DD / YYYY  
10 / 26 / 2009

**Transaction ID:** SA11AI.8304

Amount of Each Receipt this Period  
54.67

payroll deduction monthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► **249.87**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 20
	<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

Mailing Address 1818a Aupuni St

City Honolulu State HI Zip Code 96817

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

Name of Employer Horizon Lines Occupation Manager, Port Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 312.76

Date of Receipt 10 / 29 / 2009

Transaction ID: SA11AI.8312

Amount of Each Receipt this Period 36.05

payroll deduction weekly

**B.** Full Name (Last, First, Middle Initial)  
Lori A Galloway

Mailing Address P.O. Box 111393

City Anchorage State AK Zip Code 99511

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

Name of Employer Horizon Lines Occupation Manager, Port Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 645.00

Date of Receipt 10 / 29 / 2009

Transaction ID: SA11AI.8307

Amount of Each Receipt this Period 75.00

payroll deduction weekly

**C.** Full Name (Last, First, Middle Initial)  
James Garrahan

Mailing Address 73 Paseo De Orguideas

City Trujillo Alto State PR Zip Code 00976

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

Name of Employer Horizon Lines Occupation Manager, Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2009

Transaction ID: SA11AI.8269

Amount of Each Receipt this Period 50.00

payroll deduction monthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► 161.05

**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 / 20		
	<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

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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) Kenneth Gill		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 2911 Leeward Place		<b>Transaction ID:</b> SA11AI.8263
	City Anchorage	State AK	Zip Code 99516
	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, Business Processes	payroll deduction weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Claudette Hilbun		Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 1413 Swallow Circle		<b>Transaction ID:</b> SA11AI.8284
	City Lewisville	State TX	Zip Code 75077
	FEC ID number of contributing federal political committee. <b>C</b>		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 ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Paul F Hydock		Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 5890 Tarta Tropicana Condo		<b>Transaction ID:</b> SA11AI.8276
	City Carolina	State PR	Zip Code 00979
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 34.96
	Name of Employer Horizon Lines	Occupation Director, Agency and Logistics	payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 349.60	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>114.96</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 / 20
<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) Sabrina M Jackson		Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 3106 Indian Trail Ct		<b>Transaction ID:</b> SA11AI.8285
	City State Zip Code Rowlett TX 75088	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 56.65
	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 ▼ 566.50

payroll deduction monthly

<b>B.</b>	Full Name (Last, First, Middle Initial) Lana I Kanaha		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 837 Kealahou St		<b>Transaction ID:</b> SA11AI.8309
	City State Zip Code Honolulu HI 96825	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 25.00
	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 ▼ 215.00

payroll deduction weekly

<b>C.</b>	Full Name (Last, First, Middle Initial) Rich Kessler		Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 3123 Overlook Circle		<b>Transaction ID:</b> SA11AI.8297
	City State Zip Code Hilland Village TX 75077	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 157.76
	Name of Employer Occupation Horizon Services Vice president	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1577.70

payroll deduction monthly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>239.41</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 13 / 20
	<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) Marv Labrador		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 9
	Mailing Address P.O. Box 8897		<b>Transaction ID:</b> SA11AI.8296
	City Tamuning	State GU	Zip Code 96931
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 150.00
	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 ▼ 1290.00	payroll deduction weekly

<b>B.</b>	Full Name (Last, First, Middle Initial) Linda L Montgomery		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 9
	Mailing Address 157 Simmons Drive		<b>Transaction ID:</b> SA11AI.8298
	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 ▼ 364.50	payroll deduction monthly

<b>C.</b>	Full Name (Last, First, Middle Initial) Anita M. Olson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 9
	Mailing Address 1724 Tawakoni Lane		<b>Transaction ID:</b> SA11AI.8292
	City Plano	State TX	Zip Code 75075
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
	Name of Employer Horizon Lines		Occupation Manager, operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	payroll deduction monthly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	211.45
<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 14 / 20
	<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) Huei-Ning Pee	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 9
	Mailing Address 1839 Darnell Circle	<b>Transaction ID:</b> SA11AI.8291
	City State Zip Code Frisco TX 75056	Amount of Each Receipt this Period 89.52
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction monthly
	Name of Employer Occupation Horizon Lines Manager Applications	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 895.20	

<b>B.</b>	Full Name (Last, First, Middle Initial) Charles G. Raymond	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 9
	Mailing Address 9015 Winged Bourne Rd	<b>Transaction ID:</b> SA11AI.8264
	City State Zip Code Charlotte NC 28210	Amount of Each Receipt this Period 200.03
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction monthly
	Name of Employer Occupation Horizon Lines President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Sam Raymond	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 9
	Mailing Address 6143 Cedar Croft Drive	<b>Transaction ID:</b> SA11AI.8272
	City State Zip Code Charlotte NC 28266	Amount of Each Receipt this Period 85.83
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction monthly
	Name of Employer Occupation Horizon Lines Manager, Performance Monitoring	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 858.30	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>375.38</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 15 / 20
	<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 M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	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.8273
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 ▼ 420.00	<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 M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Guaynabo	PR	00969
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8290
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 ▼ 675.40	<input type="text"/> 56.65
			payroll deduction monthly

<b>C.</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 M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Guaynabo	PR	00969
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.9180
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 ▼ 687.50	<input type="text"/> 12.10
			Payroll deduction monthly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 110.75
<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 16 / 20
	<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) Frank Roznerski	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 95-40 Haalohi St	<b>Transaction ID:</b> SA11AI.8311
	City Mililani State HI Zip Code 06789	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction weekly
Name of Employer Horizon Lines Occupation Safety Manager	Aggregate Year-to-Date 215.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) Claudia Stone	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 3 Atwood Avenue	<b>Transaction ID:</b> SA11AI.8275
	City Pompton Plains State NJ Zip Code 07444	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction monthly
Name of Employer Horizon Lines Occupation Representative/ Temp/Misc	Aggregate Year-to-Date 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) Brian Taylor	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 150 Kaapuni Drive	<b>Transaction ID:</b> SA11AI.8306
	City Kallua State HI Zip Code 96734	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction monthly
Name of Employer Horizon Lines Occupation VP Country Management	Aggregate Year-to-Date 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>135.00</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 17 / 20
	<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) Duncan Wright	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 5411 Vanderbilt Avenue	<b>Transaction ID:</b> SA11AI.8281
	City State Zip Code Dallas TX 75206	Amount of Each Receipt this Period 52.50
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction monthly
Name of Employer Horizon Lines	Occupation Manager, Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 505.60	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael, Zendan	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 943 Longfield Circle	<b>Transaction ID:</b> SA11AI.8266
	City State Zip Code Charlotte NC 28270	Amount of Each Receipt this Period 114.58
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction monthly
Name of Employer Horizon Lines	Occupation VP, Deputy General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 229.16	

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert Zuckerman	Date of Receipt MM / DD / YYYY 10 / 26 / 2009
	Mailing Address 19233 Hidden Cove Lane	<b>Transaction ID:</b> SA11AI.8268
	City State Zip Code Cornelius NC 28031	Amount of Each Receipt this Period 167.00
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction monthly
Name of Employer Horizon Lines	Occupation VP Legal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1670.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>334.08</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>2510.30</b>

**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 18 / 20

<input checked="" 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 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 Sout Tryon St

City State Zip Code  
Charlotte NC 28253

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: SB21B.8261

Date of Disbursement

10 / 15 / 2009

Amount of Each Disbursement this Period

187.61

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

187.61

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

187.61

**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 19 / 20

<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)  
MIKULSKI FOR SENATE COMMITTEE

Mailing Address P O B 13147

City State Zip Code  
BALTIMORE MD 21203

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: MD District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: SB23.8259

Date of Disbursement

<sup>M</sup>  <sup>M</sup> /  <sup>D</sup>  <sup>D</sup> /  <sup>Y</sup>  <sup>Y</sup>  <sup>Y</sup>  <sup>Y</sup>

Amount of Each Disbursement this Period

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

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

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 20 / 20
	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