

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 WASHINGTON DC 20036
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00385179
3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] 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), [X] 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 09 01 2010 through 09 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.

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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	76372.93	
(c) Total Receipts (from Line 19)	2758.59	27456.23
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	79131.52	105431.52
7. Total Disbursements (from Line 31)	12500.00	38800.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	66631.52	66631.52
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

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

Report Covering the Period: From: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	2495.14	19903.22
(ii) Unitemized	263.45	7553.01
(iii) TOTAL (add Lines 11(a)(i) and (ii)	2758.59	27456.23
(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)	2758.59	27456.23
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))	2758.59	27456.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2758.59	27456.23

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12500.00	38800.00
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))..	12500.00	38800.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12500.00	38800.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	2758.59	27456.23
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2758.59	27456.23
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 / 19
(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"/> 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

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 ▼
900.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2010

Transaction ID: SA11AI.8863

Amount of Each Receipt this Period
100.00

payroll deduction

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 ▼
461.97

Date of Receipt
MM / DD / YYYY
09 / 30 / 2010

Transaction ID: SA11AI.8884

Amount of Each Receipt this Period
51.33

payroll deduction

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 ▼
450.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2010

Transaction ID: SA11AI.8886

Amount of Each Receipt this Period
50.00

payroll deduction

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 / 19
	<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 09 / 30 / 2010
	Mailing Address 3607 22nd St SE	Transaction ID: SA11AI.8882
	City Puyallup State WA Zip Code 98374	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	payroll deduction
	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 ▼ 360.00	

B.	Full Name (Last, First, Middle Initial) Mark Blankenship	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 3247 Windbluff Drive	Transaction ID: SA11AI.8866
	City Charlotte State NC Zip Code 28277	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	payroll deduction
	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 ▼ 675.00	

C.	Full Name (Last, First, Middle Initial) Alfred Bozzuffi	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 159 Bergen Street	Transaction ID: SA11AI.8857
	City Brooklyn State NY Zip Code 11217	Amount of Each Receipt this Period 45.83
	FEC ID number of contributing federal political committee. C	payroll deduction
	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 ▼ 392.89	

SUBTOTAL of Receipts This Page (optional)	160.83
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 / 19
	<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		Date of Receipt
	Mailing Address 6012 E Mercer Way		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 30 / 2010
	City	State	Zip Code
	Mercer Island	WA	98040
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8872
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 ▼ 1323.72	<input type="text"/> 147.08
payroll deduction			

B.	Full Name (Last, First, Middle Initial) Erica Compton		Date of Receipt
	Mailing Address 4838 Gurley Ave		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 30 / 2010
	City	State	Zip Code
	Dallas	TX	75223
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8876
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 ▼ 631.80	<input type="text"/> 70.20
payroll deduction			

C.	Full Name (Last, First, Middle Initial) Marion G. Davis		Date of Receipt
	Mailing Address 11511 Brayton Drive C1		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 30 / 2010
	City	State	Zip Code
	Anchorage	AK	98516
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8893
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 ▼ 975.00	<input type="text"/> 125.00
payroll deduction			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 342.28
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 / 19
	<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 ▼ 281.19

Date of Receipt 09 / 30 / 2010

Transaction ID: SA11AI.8892

Amount of Each Receipt this Period 36.05

payroll deduction

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 ▼ 585.00

Date of Receipt 09 / 30 / 2010

Transaction ID: SA11AI.8887

Amount of Each Receipt this Period 75.00

payroll deduction

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 ▼ 450.00

Date of Receipt 09 / 30 / 2010

Transaction ID: SA11AI.8856

Amount of Each Receipt this Period 50.00

payroll deduction

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 10 / 19
	<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 M M / D D / Y Y Y Y 09 / 30 / 2010
	Mailing Address 2911 Leeward Place		Transaction ID: SA11AI.8850
	City Anchorage	State AK	Zip Code 99516
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	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 ▼ 390.00	payroll deduction

B.	Full Name (Last, First, Middle Initial) Claudette Hilbun		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2010
	Mailing Address 1413 Swallow Circle		Transaction ID: SA11AI.8870
	City Lewisville	State TX	Zip Code 75077
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
	Name of Employer Horizon lines		Occupation Director, Finance and Accounting
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00	payroll deduction

C.	Full Name (Last, First, Middle Initial) Paul F Hydock		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2010
	Mailing Address 5890 Tarta Tropicana Condo		Transaction ID: SA11AI.8862
	City Carolina	State PR	Zip Code 00979
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.96
	Name of Employer Horizon Lines		Occupation Director, Agency and Logistics
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 314.64	payroll deduction

SUBTOTAL of Receipts This Page (optional)	▶	114.96
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 / 19
	<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) Sabrina M Jackson		Date of Receipt
	Mailing Address 3106 Indian Trail Ct		<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 09 / 30 / 2010
	City	State	Zip Code
	Rowlett	TX	75088
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8871
Name of Employer Horizon Lines		Occupation OTC Documenting and Finance	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 ▼ 509.85	<input type="text"/> 56.65
payroll deduction			

B.	Full Name (Last, First, Middle Initial) Marv Labrador		Date of Receipt
	Mailing Address P.O. Box 8897		<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 09 / 30 / 2010
	City	State	Zip Code
	Tamuning	GU	96931
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8880
Name of Employer Horizon Lines		Occupation General Manager, Country Mgmt	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 ▼ 1260.09	<input type="text"/> 161.55
payroll deduction			

C.	Full Name (Last, First, Middle Initial) Linda L Montgomery		Date of Receipt
	Mailing Address 157 Simmons 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 09 / 30 / 2010
	City	State	Zip Code
	Copell	TX	75019
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8881
Name of Employer Horizon Lines		Occupation Manager, Outbound Documentation	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 ▼ 328.05	<input type="text"/> 36.45
payroll deduction			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 254.65
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 12 / 19
	<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) Anita M. Olson		Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 1724 Tawakoni Lane		Transaction ID: SA11AI.8875
	City Plano	State TX	Zip Code 75075
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer Horizon Lines	Occupation Manager, operations	payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

B.	Full Name (Last, First, Middle Initial) Leslie Peters		Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 21 Shippen Court		Transaction ID: SA11AI.8879
	City Flemington	State NJ	Zip Code 08822
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
	Name of Employer Horizon Lines	Occupation Regional Sales, International	payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00	

C.	Full Name (Last, First, Middle Initial) Charles G. Raymond		Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 9015 Winged Bourne Rd		Transaction ID: SA11AI.8851
	City Charlotte	State NC	Zip Code 28210
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 554.17
	Name of Employer Horizon Lines	Occupation President & CEO	payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4987.53	

SUBTOTAL of Receipts This Page (optional)	704.17
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 / 19
	<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) Dave Rodger	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 149 Blauvelt Ave	Transaction ID: SA11AI.8859
	City State Zip Code Ho Ho Kus NJ 07423	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	payroll deduction
Name of Employer Horizon Lines	Occupation Director, Technical Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 378.00	

B.	Full Name (Last, First, Middle Initial) Jose Rodriguez	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address ALTURAS DE TORRIMAR CALLE 7 #15-1	Transaction ID: SA11AI.8874
	City State Zip Code Guaynabo PR 00969	Amount of Each Receipt this Period 69.79
	FEC ID number of contributing federal political committee. C	payroll deduction
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 ▼ 628.11	

C.	Full Name (Last, First, Middle Initial) Claudia Stone	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 3 Atwood Avenue	Transaction ID: SA11AI.8861
	City State Zip Code Pompton Plains NJ 07444	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	payroll deduction
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 ▼ 540.00	

SUBTOTAL of Receipts This Page (optional)	171.79
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 19
(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"/> 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)
Brian Taylor

Mailing Address 150 Kaapuni Drive

City State Zip Code
Kallua HI 96734

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

Name of Employer Occupation
Horizon Lines VP Country Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2010

Transaction ID: SA11AI.8894

Amount of Each Receipt this Period
50.00

payroll deduction

B.

Full Name (Last, First, Middle Initial)
Duncan Wright

Mailing Address 5411 Vanderbilt Avenue

City State Zip Code
Dallas TX 75206

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

Name of Employer Occupation
Horizon Lines Manager, Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
472.50

Date of Receipt
MM / DD / YYYY
09 / 30 / 2010

Transaction ID: SA11AI.8867

Amount of Each Receipt this Period
52.50

payroll deduction

C.

Full Name (Last, First, Middle Initial)
Michael, Zendan

Mailing Address 943 Longfield Circle

City State Zip Code
Charlotte NC 28270

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

Name of Employer Occupation
Horizon Lines VP, Deputy General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1031.22

Date of Receipt
MM / DD / YYYY
09 / 30 / 2010

Transaction ID: SA11AI.8853

Amount of Each Receipt this Period
114.58

payroll deduction

SUBTOTAL of Receipts This Page (optional) ► **217.08**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 15 / 19	
	(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 09 / 30 / 2010		
	City Cornelius	State NC	Zip Code 28031	Transaction ID: SA11AI.8855	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 167.00		
	Name of Employer Horizon Lines	Occupation VP Legal		payroll deduction	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1503.00			

SUBTOTAL of Receipts This Page (optional)	▶	167.00
TOTAL This Period (last page this line number only)	▶	2495.14

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

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

FOR LINE NUMBER:
(check only one)

PAGE 16 / 19

<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) COMMITTEE TO RE-ELECT LINDA SANCHEZ <hr/> Mailing Address 1212 S. Victory Blvd SUITE 211 <hr/> City BURBANK State CA Zip Code 91502 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> Category/Type <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 39 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8841 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 5000.00
	B. Full Name (Last, First, Middle Initial) CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE <hr/> Mailing Address PO BOX 1631 <hr/> City BALTIMORE State MD Zip Code 21203 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> Category/Type <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 07 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) LOBIONDO FOR CONGRESS <hr/> Mailing Address PO BOX 775 <hr/> City MARMORA State NJ Zip Code 08223 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> Category/Type <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8846 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional)	8500.00
TOTAL This Period (last page this line number only)	

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) MICA FOR CONGRESS Mailing Address P. O. Box 181546 City Casselberry State FL Zip Code 32718 Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 07 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8845 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
B. Full Name (Last, First, Middle Initial) PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN Mailing Address PO BOX 3662 City SEATTLE State WA Zip Code 98124 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8847 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
C. Full Name (Last, First, Middle Initial) SUE MYRICK FOR CONGRESS Mailing Address P.O. Box 37091 City Charlotte State NC Zip Code 28237 Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8843 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 1500.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

**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 / 19

<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)

TIBERI FOR CONGRESS

Mailing Address 2931 E Dublin Granville Road
Suite 190

City State Zip Code
Columbus OH 43231

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: OH District: 12

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.8848

Date of Disbursement

/ /

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 19 / 19
	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