

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Horizon Lines LLC Associates Good Gov't Fund (Horizon Lines Associates Good Gov't Fund)

ADDRESS (number and street) 2001 K Street, NW, Suite 400
Attn: W. Farah
WASHINGTON DC 20006

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|--|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input checked="" type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [09] / [01] / [2012] through [09] / [30] / [2012]

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

Mark Blankenship

[Electronically Filed]

Date

[10] / [03] / [2012]

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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Horizon Lines LLC Associates Good Gov't Fund (Horizon Lines Associates Good Gov't Fund)

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="2012"/>	<input type="text" value="46075.67"/>	<input type="text" value="46075.67"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="31619.48"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1326.46"/>	<input type="text" value="11370.27"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="32945.94"/>	<input type="text" value="57445.94"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2000.00"/>	<input type="text" value="26500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="30945.94"/>	<input type="text" value="30945.94"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

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).....	1165.04	6861.48
(ii) Unitemized	161.42	4508.79
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1326.46	11370.27
(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)	1326.46	11370.27
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 Transfers (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))..... ▶	1326.46	11370.27
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1326.46	11370.27

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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.....	2000.00	26500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated 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)) ..	2000.00	26500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2000.00	26500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	1326.46	11370.27
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1326.46	11370.27
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 17
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Horizon Lines LLC Associates Good Gov't Fund (Horizon Lines Associates Good Gov't Fund)

A. Henry Bell
Full Name (Last, First, Middle Initial)
Mailing Address 4701 Preston Park Blvd
City Plano State TX Zip Code 75093
FEC ID number of contributing federal political committee. **C**
Name of Employer Horizon Lines Occupation Financial Analyst Manager
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 450.00

Date of Receipt 09 / 28 / 2012
Transaction ID : SA11AI.10701
Amount of Each Receipt this Period 50.00
Contribution

B. Thomas M Bellerud
Full Name (Last, First, Middle Initial)
Mailing Address 3607 22nd St SE
City Puyallup State WA Zip Code 98374
FEC ID number of contributing federal political committee. **C**
Name of Employer Horizon Lines Occupation Outside Sales
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 360.00

Date of Receipt 09 / 28 / 2012
Transaction ID : SA11AI.10702
Amount of Each Receipt this Period 40.00
Contribution

C. Alfred Bozuffi
Full Name (Last, First, Middle Initial)
Mailing Address 159 Bergen Street
City Brooklyn State NY Zip Code 11217
FEC ID number of contributing federal political committee. **C**
Name of Employer Horizon Lines Occupation Naval Architect
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 418.41

Date of Receipt 09 / 28 / 2012
Transaction ID : SA11AI.10704
Amount of Each Receipt this Period 47.81
Contribution

SUBTOTAL of Receipts This Page (optional).....▶ 137.81
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 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Horizon Lines LLC Associates Good Gov't Fund (Horizon Lines Associates Good Gov't Fund)

Full Name (Last, First, Middle Initial) A. Marvin Buchanan		Date of Receipt
Mailing Address 6012 E Mercer Way		<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2012"/>
City	State	Zip Code
Mercer Island	WA	98040
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.10705
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="153.42"/>
Name of Employer	Occupation	Contribution
Horizon Lines	Director, Marketing	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1342.74"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Marion G. Davis		Date of Receipt
Mailing Address 11511 Brayton Drive C1		<input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City	State	Zip Code
Anchorage	AK	98516
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.10659
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	Contribution
Horizon Lines	Director, operations	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="900.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Marion G. Davis		Date of Receipt
Mailing Address 11511 Brayton Drive C1		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City	State	Zip Code
Anchorage	AK	98516
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.10667
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	Contribution
Horizon Lines	Director, operations	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="925.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="203.42"/>
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 8 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Horizon Lines LLC Associates Good Gov't Fund (Horizon Lines Associates Good Gov't Fund)

Full Name (Last, First, Middle Initial) A. Marion G. Davis		Date of Receipt MM / DD / YYYY 09 / 20 / 2012 Transaction ID : SA11Al.10668
Mailing Address 11511 Brayton Drive C1		Amount of Each Receipt this Period 25.00
City Anchorage	State AK	Zip Code 98516
FEC ID number of contributing federal political committee. C		Contribution
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 ▼ 950.00	

Full Name (Last, First, Middle Initial) B. Marion G. Davis		Date of Receipt MM / DD / YYYY 09 / 27 / 2012 Transaction ID : SA11Al.10669
Mailing Address 11511 Brayton Drive C1		Amount of Each Receipt this Period 25.00
City Anchorage	State AK	Zip Code 98516
FEC ID number of contributing federal political committee. C		Contribution
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 ▼ 975.00	

Full Name (Last, First, Middle Initial) C. Marion G. Davis		Date of Receipt MM / DD / YYYY 09 / 30 / 2012 Transaction ID : SA11Al.10670
Mailing Address 11511 Brayton Drive C1		Amount of Each Receipt this Period 25.00
City Anchorage	State AK	Zip Code 98516
FEC ID number of contributing federal political committee. C		Contribution
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 ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 9 OF 17
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Horizon Lines LLC Associates Good Gov't Fund (Horizon Lines Associates Good Gov't Fund)

Full Name (Last, First, Middle Initial) A. Dwayne Fujitani		Date of Receipt MM / DD / YYYY 09 / 06 / 2012 Transaction ID : SA11AI.10661
Mailing Address 1818a Aupuni St		Amount of Each Receipt this Period 7.93
City Honolulu	State HI	Zip Code 96817
FEC ID number of contributing federal political committee. C		Contribution
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 ▼ 283.32	

Full Name (Last, First, Middle Initial) B. Dwayne Fujitani		Date of Receipt MM / DD / YYYY 09 / 13 / 2012 Transaction ID : SA11AI.10675
Mailing Address 1818a Aupuni St		Amount of Each Receipt this Period 7.93
City Honolulu	State HI	Zip Code 96817
FEC ID number of contributing federal political committee. C		Contribution
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 ▼ 291.25	

Full Name (Last, First, Middle Initial) C. Dwayne Fujitani		Date of Receipt MM / DD / YYYY 09 / 20 / 2012 Transaction ID : SA11AI.10676
Mailing Address 1818a Aupuni St		Amount of Each Receipt this Period 7.93
City Honolulu	State HI	Zip Code 96817
FEC ID number of contributing federal political committee. C		Contribution
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 ▼ 299.18	

SUBTOTAL of Receipts This Page (optional).....▶	23.79
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: (check only one)	PAGE 10 OF 17
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Horizon Lines LLC Associates Good Gov't Fund (Horizon Lines Associates Good Gov't Fund)

A. Dwayne Fujitani
Full Name (Last, First, Middle Initial)
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 **307.11**

Date of Receipt: 09 / 27 / 2012
Transaction ID : SA11Al.10677
Amount of Each Receipt this Period: 7.93
Contribution

B. Dwayne Fujitani
Full Name (Last, First, Middle Initial)
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 **315.04**

Date of Receipt: 09 / 30 / 2012
Transaction ID : SA11Al.10678
Amount of Each Receipt this Period: 7.93
Contribution

C. Lori A Galloway
Full Name (Last, First, Middle Initial)
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 **540.00**

Date of Receipt: 09 / 06 / 2012
Transaction ID : SA11Al.10662
Amount of Each Receipt this Period: 15.00
Contribution

SUBTOTAL of Receipts This Page (optional)..... **30.86**
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 OF 17
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Horizon Lines LLC Associates Good Gov't Fund (Horizon Lines Associates Good Gov't Fund)

Full Name (Last, First, Middle Initial) A. Lori A Galloway		Date of Receipt MM / DD / YYYY 09 / 13 / 2012 Transaction ID : SA11Al.10679
Mailing Address P.O. Box 111393		Amount of Each Receipt this Period 15.00
City Anchorage	State AK	Zip Code 99511
FEC ID number of contributing federal political committee. C	Contribution	
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 ▼ 555.00	

Full Name (Last, First, Middle Initial) B. Lori A Galloway		Date of Receipt MM / DD / YYYY 09 / 20 / 2012 Transaction ID : SA11Al.10680
Mailing Address P.O. Box 111393		Amount of Each Receipt this Period 15.00
City Anchorage	State AK	Zip Code 99511
FEC ID number of contributing federal political committee. C	Contribution	
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 ▼ 570.00	

Full Name (Last, First, Middle Initial) C. Lori A Galloway		Date of Receipt MM / DD / YYYY 09 / 27 / 2012 Transaction ID : SA11Al.10681
Mailing Address P.O. Box 111393		Amount of Each Receipt this Period 15.00
City Anchorage	State AK	Zip Code 99511
FEC ID number of contributing federal political committee. C	Contribution	
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 ▼ 585.00	

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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:	PAGE 12 OF 17
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

Full Name (Last, First, Middle Initial) A. Lori A Galloway			Date of Receipt MM / DD / YYYY 09 / 30 / 2012 Transaction ID : SA11AI.10682
Mailing Address P.O. Box 111393			Amount of Each Receipt this Period 15.00
City Anchorage	State AK	Zip Code 99511	Contribution
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Horizon Lines	Occupation Manager, Port Operations	Contribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	Contribution	

Full Name (Last, First, Middle Initial) B. James Garrahan			Date of Receipt MM / DD / YYYY 09 / 28 / 2012 Transaction ID : SA11AI.10706
Mailing Address 73 Paseo De Orguideas			Amount of Each Receipt this Period 50.00
City Trujillo Alto	State PR	Zip Code 00976	Contribution
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Horizon Lines	Occupation Manager, Sales	Contribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	Contribution	

Full Name (Last, First, Middle Initial) C. Kenneth Gill			Date of Receipt MM / DD / YYYY 09 / 06 / 2012 Transaction ID : SA11AI.10663
Mailing Address 2911 Leeward Place			Amount of Each Receipt this Period 10.00
City Anchorage	State AK	Zip Code 99516	Contribution
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Horizon Lines	Occupation Manager, Business Processes	Contribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	Contribution	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 13 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Horizon Lines LLC Associates Good Gov't Fund (Horizon Lines Associates Good Gov't Fund)

Full Name (Last, First, Middle Initial) A. Kenneth Gill			Date of Receipt
Mailing Address 2911 Leeward Place			<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11Al.10683
Anchorage	AK	99516	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		Contribution
Horizon Lines	Manager, Business Processes		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="370.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Kenneth Gill			Date of Receipt
Mailing Address 2911 Leeward Place			<input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11Al.10684
Anchorage	AK	99516	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		Contribution
Horizon Lines	Manager, Business Processes		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="380.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Kenneth Gill			Date of Receipt
Mailing Address 2911 Leeward Place			<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11Al.10685
Anchorage	AK	99516	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		Contribution
Horizon Lines	Manager, Business Processes		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="390.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="30.00"/>
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 14 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Horizon Lines LLC Associates Good Gov't Fund (Horizon Lines Associates Good Gov't Fund)

A. Kenneth Gill
Full Name (Last, First, Middle Initial)

Mailing Address 2911 Leeward Place

City Anchorage State AK Zip Code 99516

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

Name of Employer Horizon Lines Occupation Manager, Business Processes

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **09 / 30 / 2012**
Transaction ID : **SA11AI.10686**

Amount of Each Receipt this Period **100.00**

Contribution

B. Sabrina M Jackson
Full Name (Last, First, Middle Initial)

Mailing Address 3106 Indian Trail Ct

City Rowlett State TX Zip Code 75088

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

Name of Employer Horizon Lines Occupation OTC Documenting and Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **515.79**

Date of Receipt **09 / 28 / 2012**
Transaction ID : **SA11AI.10708**

Amount of Each Receipt this Period **58.63**

Contribution

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

Mailing Address 157 Simmons Drive

City Copell State TX Zip Code 75019

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

Name of Employer Horizon Lines Occupation Manager, Outbound Documentation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **328.05**

Date of Receipt **09 / 28 / 2012**
Transaction ID : **SA11AI.10710**

Amount of Each Receipt this Period **36.45**

Contribution

SUBTOTAL of Receipts This Page (optional).....▶ **105.08**

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: (check only one)	PAGE 15 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Horizon Lines LLC Associates Good Gov't Fund (Horizon Lines Associates Good Gov't Fund)

Full Name (Last, First, Middle Initial) A. Janet Nieves		Date of Receipt MM / DD / YYYY 09 / 28 / 2012 Transaction ID : SA11Al.10711
Mailing Address Paseo Perla #207 Santa Barbara		Amount of Each Receipt this Period Contribution 20.00
City Gurabo	State PR	Zip Code 00778
FEC ID number of contributing federal political committee. C	Name of Employer Horizon Lines	Occupation Safety and Security Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ -80.00	

Full Name (Last, First, Middle Initial) B. Anita M. Olson		Date of Receipt MM / DD / YYYY 09 / 28 / 2012 Transaction ID : SA11Al.10712
Mailing Address 1724 Tawakoni Lane		Amount of Each Receipt this Period Contribution 25.00
City Plano	State TX	Zip Code 75075
FEC ID number of contributing federal political committee. C	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 ▼ 225.00	

Full Name (Last, First, Middle Initial) C. Claudia Stone		Date of Receipt MM / DD / YYYY 09 / 28 / 2012 Transaction ID : SA11Al.10716
Mailing Address 3 Atwood Avenue		Amount of Each Receipt this Period Contribution 62.50
City Pompton Plains	State NJ	Zip Code 07444
FEC ID number of contributing federal political committee. C	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 ▼ 547.50	

SUBTOTAL of Receipts This Page (optional).....▶	107.50
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 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Horizon Lines LLC Associates Good Gov't Fund (Horizon Lines Associates Good Gov't Fund)

Full Name (Last, First, Middle Initial)
A. Brian Taylor

Mailing Address 150 Kaapuni Drive

City Kallua State HI Zip Code 96734

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

Name of Employer Horizon Lines Occupation VP Country Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **09 / 28 / 2012**

Transaction ID : SA11Al.10717

Amount of Each Receipt this Period **50.00**

Contribution

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

Mailing Address 943 Longfield Circle

City Charlotte State NC Zip Code 28270

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

Name of Employer Horizon Lines Occupation VP, Deputy General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1031.22**

Date of Receipt **09 / 28 / 2012**

Transaction ID : SA11Al.10718

Amount of Each Receipt this Period **114.58**

Contribution

Full Name (Last, First, Middle Initial)
C. Robert Zuckerman

Mailing Address 19233 Hidden Cove Lane

City Cornelius State NC Zip Code 28031

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

Name of Employer Horizon Lines Occupation VP Legal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1503.00**

Date of Receipt **09 / 28 / 2012**

Transaction ID : SA11Al.10719

Amount of Each Receipt this Period **167.00**

Contribution

SUBTOTAL of Receipts This Page (optional).....▶	331.58
TOTAL This Period (last page this line number only).....▶	1165.04

**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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

Full Name (Last, First, Middle Initial)

A. TULSI FOR HAWAII

Mailing Address PO BOX 75561

City KAPOLEI State HI Zip Code 96707

Purpose of Disbursement contribution

Candidate Name

TULSI GABBARD

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: HI District: 02

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2012

Transaction ID : SB23.10654

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. WICKER FOR SENATE

Mailing Address PO BOX 64

City JACKSON State MS Zip Code 39205

Purpose of Disbursement Contribution

Candidate Name

ROGER F WICKER

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MS District: 00

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : SB23.10658

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

2000.00

2000.00