

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

Horizon Lines LLC Associates Good Government Fund (Horizon Lines Associates Good Gov't F

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="2004"/>		1126.28
(b) Cash on Hand at Beginning of Reporting Period	1126.28	
(c) Total Receipts (from Line 19)	12497.63	12497.63
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	13623.91	13623.91
7. Total Disbursements (from Line 31)	7775.97	7775.97
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5847.94	5847.94
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 Gov't F

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)	10309.59	10309.59
(ii) Unitemized	2188.04	2188.04
(iii) TOTAL (add Lines 11(a)(i) and (ii)	12497.63	12497.63
(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)	12497.63	12497.63
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))	12497.63	12497.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	12497.63	12497.63

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.....	6775.97	6775.97
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	6775.97	6775.97
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	1000.00	1000.00
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))..	7775.97	7775.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7775.97	7775.97

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)	12497.63	12497.63
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12497.63	12497.63
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	6775.97	6775.97
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6775.97	6775.97

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

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

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

A.	Full Name (Last, First, Middle Initial) Robbie L Bell		Date of Receipt
	Mailing Address 3301 NE 5th St Apt 711		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 1 0 / 2 0 0 4
	City	State	Zip Code
	Miami	FL	33137
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4201
Name of Employer Horizon Lines		Occupation Analyst, Human resources	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"/> 400.00

B.	Full Name (Last, First, Middle Initial) Mark Blankenship		Date of Receipt
	Mailing Address 4064 Colony Road Suite 200		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 2 4 / 2 0 0 4
	City	State	Zip Code
	Charlotte	NC	28211
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4224
Name of Employer Horizon Lines		Occupation VP, Controller	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"/> 1000.00

C.	Full Name (Last, First, Middle Initial) John Catechis		Date of Receipt
	Mailing Address 2440 1st Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 2 4 / 2 0 0 4
	City	State	Zip Code
	Fort Lee	NJ	07024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4226
Name of Employer Horizon Lines		Occupation 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 ▼	<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1650.00
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 7 / 14
	<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 Gov't F

A. Full Name (Last, First, Middle Initial)
John Keenan

Mailing Address 3030 Woodhollow Drive

City Highland View State TX Zip Code 75077

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

Name of Employer Horizon Lines Occupation Senior VP , OPerations and COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 01 / 15 / 2004

Transaction ID: SA11AI.4139

Amount of Each Receipt this Period 2000.00

B. Full Name (Last, First, Middle Initial)
Rich Kessler

Mailing Address 3123 Overlook Circle

City Hilland Village State TX Zip Code 75077

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

Name of Employer Horizon Services Occupation Vice president

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 376.25

Date of Receipt 01 / 15 / 2004

Transaction ID: SA11AI.4138

Amount of Each Receipt this Period 376.25

check for \$250 payroll deduction \$126.25

C. Full Name (Last, First, Middle Initial)
David G. Kolesky

Mailing Address 861 Hunt Circle

City Anchorage State AK Zip Code 99504

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 ▼ 300.00

Date of Receipt 02 / 24 / 2004

Transaction ID: SA11AI.4222

Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) ► 2676.25

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 / 14
	<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 Gov't F

A.	Full Name (Last, First, Middle Initial) Anita M. Olson		Date of Receipt
	Mailing Address 1724 Tawakoni Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 0 4 / 2 0 0 4
	City	State	Zip Code
	Plano	TX	75075
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4183
Name of Employer Horizon Lines		Occupation Manager, 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 ▼ 250.00	<input type="text"/> 250.00

B.	Full Name (Last, First, Middle Initial) Neil S Perlmutter		Date of Receipt
	Mailing Address 11358 Charlotte View Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 3 / 0 5 / 2 0 0 4
	City	State	Zip Code
	Charlotte	NC	28277
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4228
Name of Employer Horizon lines		Occupation VP, Strategic Planning & Bus Developme	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 ▼ 650.00	<input type="text"/> 650.00

C.	Full Name (Last, First, Middle Initial) Kenneth Privratsky		Date of Receipt
	Mailing Address 7201 Montagne Circle		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 2 2 / 2 0 0 4
	City	State	Zip Code
	Anchorage	AK	99507
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4141
Name of Employer Horizon Lines		Occupation VP Country Management	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	<input type="text"/> 2500.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3400.00
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 9 / 14
	<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 Gov't F

A.	Full Name (Last, First, Middle Initial) Charles G. Raymond		Date of Receipt
	Mailing Address 9015 Winged Bourne Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Charlotte	NC	28210
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4205
Name of Employer Horizon Lines		Occupation President & CEO	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"/> 833.34
			payroll deduction - monthly

B.	Full Name (Last, First, Middle Initial) Karen Richards		Date of Receipt
	Mailing Address 10012 Hazelview Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Charlotte	NC	28277
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4147
Name of Employer Horizon Lines		Occupation VP 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 ▼	<input type="text"/> 1000.00

C.	Full Name (Last, First, Middle Initial) Duane Smith		Date of Receipt
	Mailing Address 20342 NE 34th 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
	City	State	Zip Code
	Sammamish	WA	98074
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4185
Name of Employer Horizon Lnes		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 ▼	<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2833.34
TOTAL This Period (last page this line number only)	<input type="text"/>

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.4205**

This contributor makes contributions by payroll deduction. This report and reports in 2004, 2005, and 2006 have been amended to reflect the date of receipt for these contributions as the actual date of payroll deduction, rather than the date of deposit into the committee's bank account. These corrections will not change the aggregate contributions for this contributor. The purpose of these amendments is to ensure that contributions from this contributor will appear in the month in which they actually were deducted from his check.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 14	
	(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 Gov't F

A.	Full Name (Last, First, Middle Initial) Brian Taylor		Date of Receipt	
	Mailing Address 150 Kaapuni Drive		M M / D D / Y Y Y Y 0 1 / 0 6 / 2 0 0 4	
	City Kallua	State HI	Zip Code 96734	
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4132	
	Name of Employer Horizon Lines	Occupation VP Country Management		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
			Amount of Each Receipt this Period 500.00	

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	10309.59

**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 12 / 14

<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 Gov't F

A. Full Name (Last, First, Middle Initial) BSY Associates Mailing Address 195 Fairfield Ave. Suite 4D City West Caldwell State NJ Zip Code 07006 Purpose of Disbursement payment for printed materials Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.9544 Date of Disbursement 01 / 22 / 2004
	Amount of Each Disbursement this Period 3770.00
B. Full Name (Last, First, Middle Initial) BSY Associates Mailing Address 195 Fairfield Ave. Suite 4D City West Caldwell State NJ Zip Code 07006 Purpose of Disbursement payment for printing services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4237 Date of Disbursement 02 / 04 / 2004
	Amount of Each Disbursement this Period 2905.07

SUBTOTAL of Disbursements This Page (optional) ►

6675.07

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

6675.07

**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 13 / 14

<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 Gov't F

A.

Full Name (Last, First, Middle Initial)

Inouye for Senate

Mailing Address 841 BISHOP STREET SUITE 1601

City HONOLULU State HI Zip Code 96813

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: HI District: 00

Disbursement For: 2004
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.4125

Date of Disbursement

MM / DD / YYYY
02 / 05 / 2004

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 14 / 14
	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 Gov't F

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 2905.07	Transaction ID: SD10.4121	
Amount Incurred This Period 0.00	Payment This Period 2905.07	Outstanding Balance at Close of This Period 0.00

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 3770.00	Outstanding Balance at Close of This Period 0.00

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