

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Horizon Lines, LLC Associates Good Government Fund/Horizon Lines Associates Good Govt Fu

ADDRESS (number and street) 1050 Connecticut Ave NW
Suite 1200 c/o T. WALLS
 Check if different than previously reported. (ACC)
WASHINGTON DC 20036

2. **FEC IDENTIFICATION NUMBER** C00385179
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(d) 30-Day Post -Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 11 23 2010 through 12 31 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.

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

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

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		77975.29
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	59495.03									
(c) Total Receipts (from Line 19)	3780.64	33600.38								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	63275.67	111575.67								
7. Total Disbursements (from Line 31)	0.00	48300.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	63275.67	63275.67								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

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

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	3608.64	25659.34
(ii) Unitemized	172.00	7941.04
(iii) TOTAL (add Lines 11(a)(i) and (ii)	3780.64	33600.38
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	3780.64	33600.38
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	3780.64	33600.38
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3780.64	33600.38

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.....	0.00	48300.00
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))..	0.00	48300.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	48300.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	3780.64	33600.38
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3780.64	33600.38
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 / 18
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 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)
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 ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.8980

Amount of Each Receipt this Period
200.00

payroll deduction monthly

B.

Full Name (Last, First, Middle Initial)
Charles Battiatto

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 ▼ 615.96

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.9000

Amount of Each Receipt this Period
102.66

payroll deduction monthly

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 ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.9002

Amount of Each Receipt this Period
100.00

payroll deduction monthly

SUBTOTAL of Receipts This Page (optional) ► **402.66**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.

Full Name (Last, First, Middle Initial)
Thomas M Bellerud

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 ▼ 480.00

Date of Receipt 12 / 30 / 2010

Transaction ID: SA11AI.8998

Amount of Each Receipt this Period 80.00

payroll deduction monthly

B.

Full Name (Last, First, Middle Initial)
Alfred Bozzuffi

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 ▼ 530.38

Date of Receipt 12 / 30 / 2010

Transaction ID: SA11AI.8974

Amount of Each Receipt this Period 91.66

payroll deduction monthly

C.

Full Name (Last, First, Middle Initial)
Marvin Buchanan

Mailing Address 6012 E Mercer Way

City Mercer Island State WA Zip Code 98040

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

Name of Employer Horizon Lines Occupation Director, Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1764.96

Date of Receipt 12 / 30 / 2010

Transaction ID: SA11AI.8988

Amount of Each Receipt this Period 294.16

payroll deduction monthly

SUBTOTAL of Receipts This Page (optional) ► 465.82

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Kenneth K Chu		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 1604 Woodcutter Court		Transaction ID: SA11AI.9004
	City Anchorage	State AK	Zip Code 99507
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
	Name of Employer Horizon Lines Occupation Shift Manager		payroll deduction weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) Erica Compton		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 4838 Gurley Ave		Transaction ID: SA11AI.8992
	City Dallas	State TX	Zip Code 75223
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 140.40
	Name of Employer Horizon Lines Occupation Manager, Collections		payroll deduction monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 842.40	

C.	Full Name (Last, First, Middle Initial) Marion G. Davis		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 11511 Brayton Drive C1		Transaction ID: SA11AI.9009
	City Anchorage	State AK	Zip Code 98516
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
	Name of Employer Horizon Lines Occupation Director, operations		payroll deduction weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional)	320.40
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 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Dwayne Fujitani		Date of Receipt
	Mailing Address 1818a Aupuni St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Honolulu	HI	96817
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.9008
Name of Employer Horizon Lines		Occupation Manager, Port Operations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 43.26
		<input type="text"/> 374.92	payroll deduction weekly

B.	Full Name (Last, First, Middle Initial) Lori A Galloway		Date of Receipt
	Mailing Address P.O. Box 111393		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Anchorage	AK	99511
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.9003
Name of Employer Horizon Lines		Occupation Manager, Port Operations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 90.00
		<input type="text"/> 780.00	payroll deduction weekly

C.	Full Name (Last, First, Middle Initial) James Garrahan		Date of Receipt
	Mailing Address 73 Paseo De Orguideas		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Trujillo Alto	PR	00976
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.8973
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"/> 100.00
		<input type="text"/> 600.00	payroll deduction monthly

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 233.26
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 10 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Kenneth Gill		Date of Receipt
	Mailing Address 2911 Leeward Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Anchorage	AK	99516
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8968
Name of Employer Horizon Lines		Occupation Manager, Business Processes	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 ▼ 520.00	<input type="text"/> 60.00
			payroll deduction weekly

B.	Full Name (Last, First, Middle Initial) Claudette Hilbun		Date of Receipt
	Mailing Address 1413 Swallow Circle		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Lewisville	TX	75077
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8986
Name of Employer Horizon lines		Occupation Director, Finance and Accounting	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 ▼ 360.00	<input type="text"/> 60.00
			payroll deduction monthly

C.	Full Name (Last, First, Middle Initial) Gunther Hoock		Date of Receipt
	Mailing Address 7804 Clark Springs Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Plano	TX	75025
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8985
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 ▼ 240.00	<input type="text"/> 40.00
			payroll deduction monthly

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 160.00
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: PAGE 11 / 18

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

Paul F Hydock

Mailing Address 5890 Tarta Tropicana Condo

City State Zip Code
Carolina PR 00979

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

Name of Employer Occupation
Horizon Lines Director, Agency and Logistics

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 384.56

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.8979

Amount of Each Receipt this Period

34.96

payroll deduction monthly

B.

Full Name (Last, First, Middle Initial)

Sabrina M Jackson

Mailing Address 3106 Indian Trail Ct

City State Zip Code
Rowlett TX 75088

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

Name of Employer Occupation
Horizon Lines OTC Documenting and Finance

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 679.80

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.8987

Amount of Each Receipt this Period

113.30

payroll deduction monthly

C.

Full Name (Last, First, Middle Initial)

Lana I Kanaha

Mailing Address 837 Kealahou St

City State Zip Code
Honolulu HI 96825

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

Name of Employer Occupation
Horizon Lines Supervisor, Port operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.9005

Amount of Each Receipt this Period

30.00

payroll deduction weekly

SUBTOTAL of Receipts This Page (optional)

178.26

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 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) 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
	City	State	Zip Code
	Tamuning	GU	96931
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Horizon Lines		Occupation General Manager, Country Mgmt	Transaction ID: SA11AI.8996
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 1680.12	<input type="text"/> 193.86
payroll deduction weekly			

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

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
	City	State	Zip Code
	Copell	TX	75019
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Horizon Lines		Occupation Manager, Outbound Documentation	Transaction ID: SA11AI.8997
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 437.40	<input type="text"/> 72.90
payroll deduction monthly			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 306.76
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 13 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Anita M. Olson		Date of Receipt
	Mailing Address 1724 Tawakoni Lane		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Plano	TX	75075
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8991
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 ▼ <input type="text" value="300.00"/>	<input type="text" value="50.00"/>
			payroll deduction monthly

B.	Full Name (Last, First, Middle Initial) Anthony Pagud		Date of Receipt
	Mailing Address 95-359 Lonomea Street		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Mililani	HI	96789
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9006
Name of Employer Horizon Lines		Occupation Container Yard/Auto Supervisor	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="223.08"/>	<input type="text" value="25.74"/>
			payroll deduction weekly

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

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="325.74"/>
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 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Steve Powers		Date of Receipt
	Mailing Address 1805 Red Rock Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 0 / 2 0 1 0
	City	State	Zip Code
	McKinney	TX	75075
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8984
Name of Employer Horizon Lines		Occupation Manager, Equipment	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 40.00
			payroll deduction monthly

B.	Full Name (Last, First, Middle Initial) Billy D Pritchett		Date of Receipt
	Mailing Address 4121 Engleman St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Fort Worth	TX	76137
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8994
Name of Employer Horizon Lines		Occupation Financial Analyst	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 204.00	<input type="text"/> 34.00
			payroll deduction monthly

C.	Full Name (Last, First, Middle Initial) Dave Rodger		Date of Receipt
	Mailing Address 149 Blauvelt Ave		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Ho Ho Kus	NJ	07423
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8976
Name of Employer Horizon Lines		Occupation Director, Technical Services	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 504.00	<input type="text"/> 84.00
			payroll deduction monthly

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 158.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 15 / 18

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 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)

Jose Rodriguez

Mailing Address ALTURAS DE TORRIMAR CALLE 7 #15-1

City State Zip Code
Guaynabo PR 00969

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

Name of Employer Occupation
Horizon Lines General Manager, Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 837.48

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.8990

Amount of Each Receipt this Period

139.58

payroll deduction monthly

B.

Full Name (Last, First, Middle Initial)

Frank Roznerski

Mailing Address 95-40 Haalohi St

City State Zip Code
Mililani HI 06789

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

Name of Employer Occupation
Horizon Lines Safety Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.9007

Amount of Each Receipt this Period

30.00

payroll deduction weekly

C.

Full Name (Last, First, Middle Initial)

Claudia Stone

Mailing Address 3 Atwood Avenue

City State Zip Code
Pompton Plains NJ 07444

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

Name of Employer Occupation
Horizon Lines Representative/ Temp/Misc

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 720.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.8978

Amount of Each Receipt this Period

120.00

payroll deduction monthly

SUBTOTAL of Receipts This Page (optional) ►

289.58

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 18
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 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 ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.9010

Amount of Each Receipt this Period
100.00

payroll deduction monthly

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 ▼ 630.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.8983

Amount of Each Receipt this Period
105.00

payroll deduction monthly

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 ▼ 1374.96

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.8970

Amount of Each Receipt this Period
229.16

payroll deduciton monthly

SUBTOTAL of Receipts This Page (optional) ► **434.16**

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 17 / 18	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Robert Zuckerman		Date of Receipt																					
	Mailing Address 19233 Hidden Cove Lane		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	0		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		3	0		2	0	1	0														
	City	State	Zip Code	Transaction ID: SA11AI.8972																				
	Cornelius	NC	28031	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		C	334.00																					
Name of Employer Horizon Lines		Occupation VP Legal	payroll deduction monthly																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	2004.00																					

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 18 / 18	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor BSY Associates	Nature of Debt (Purpose): design, production of printed materials
Mailing Address 195 Fairfield Ave. Suite 4D	
City State ZIP Code West Caldwell NJ 07006	

Outstanding Balance Beginning This Period <input type="text" value="-3770.00"/>	Transaction ID: SD10.4121	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="-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 <input type="text" value="3770.00"/>	Transaction ID: SD10.4120	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3770.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="0.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="0.00"/>