

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

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

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

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 05 01 2007 through 05 31 2007

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 06 20 2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**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
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		68461.92
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	70829.84									
(c) Total Receipts (from Line 19) .....	3843.58	20483.89								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	74673.42	88945.81								
7. Total Disbursements (from Line 31) .....	11000.00	25272.39								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	63673.42	63673.42								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

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

Report Covering the Period: From:    To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	2866.55	10675.07
(i) Itemized (use Schedule A) .....	977.03	9808.82
(ii) Unitemized .....	3843.58	20483.89
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	3843.58	20483.89
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)) .....	3843.58	20483.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	3843.58	20483.89

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	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.....	11000.00	25000.00
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	272.39
(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	272.39
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))..	11000.00	25272.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	11000.00	25272.39

**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) .....	3843.58	20483.89
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	272.39
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3843.58	20211.50
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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 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	

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

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

**A.** Full Name (Last, First, Middle Initial)  
Charles Battiato

Mailing Address P.O. Box 894715

City State Zip Code  
Mililani HI 96789

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

Name of Employer Occupation  
Horizon Lines Manager, Sales

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 243.42

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2007

Transaction ID: SA11A1.6312

Amount of Each Receipt this Period  
49.83

payroll deduction

**B.** Full Name (Last, First, Middle Initial)  
Jane L Bowers

Mailing Address 1204 Dentonshire Drive

City State Zip Code  
Carrollton TX 75007

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

Name of Employer Occupation  
Horizon Lines Director, CUser Service

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2007

Transaction ID: SA11A1.6291

Amount of Each Receipt this Period  
50.00

payroll deduction

**C.** Full Name (Last, First, Middle Initial)  
Jeff Brennan

Mailing Address 47-432 Waihee Rd

City State Zip Code  
Kaneohe HI 96744-4951

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

Name of Employer Occupation  
Horizon Lines Manager, Port Operations

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2007

Transaction ID: SA11A1.6303

Amount of Each Receipt this Period  
40.00

payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	139.83
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or 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"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) Eric Britten Mailing Address 17530 Steamboat Dr City Anchorage State AK Zip Code 99516 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.6304 Amount of Each Receipt this Period 60.00 payroll deduction
Name of Employer: Horizon Lines Occupation: Manager, Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00		

<b>B.</b> 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. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.6283 Amount of Each Receipt this Period 129.64 payroll deduction
Name of Employer: Horizon Lines Occupation: Director, Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 633.74		

<b>C.</b> Full Name (Last, First, Middle Initial) Tricia Anne Covais-Perhirin Mailing Address 901 Autumn Ridge Road City McKinney State TX Zip Code 75070 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.6268 Amount of Each Receipt this Period 53.58 payroll deduction
Name of Employer: Horizon Lines Occupation: Director, Information Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 261.66		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>243.22</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or 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"/> 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)  
Marion G. Davis

Mailing Address 11511 Brayton Drive C1

City Anchorage State AK Zip Code 98516

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

Name of Employer Horizon Lines Occupation Director, operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
05 / 30 / 2007

Transaction ID: SA11A1.6329

Amount of Each Receipt this Period  
100.00

payroll deduction

**B.** Full Name (Last, First, Middle Initial)  
Kelly Dennison

Mailing Address 4409 Mariannes Ridge Road

City Charlotte State NC Zip Code 28273

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

Name of Employer Horizon Lines Occupation Director, Corp Marketing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 30 / 2007

Transaction ID: SA11A1.6259

Amount of Each Receipt this Period  
50.00

payroll deduction'

**C.** Full Name (Last, First, Middle Initial)  
Dan Downes

Mailing Address 12956 Se 301st St

City Auburn State WA Zip Code 98092

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 ▼ 236.45

Date of Receipt  
05 / 30 / 2007

Transaction ID: SA11A1.6314

Amount of Each Receipt this Period  
49.93

payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	199.93
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or 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)  
Clifford Farley

Mailing Address 3570 Sharatin Road

City Kodiak State AK Zip Code 99615

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

Name of Employer Horizon Lines Occupation Manager - Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 30 / 2007

Transaction ID: SA11A1.6287

Amount of Each Receipt this Period  
100.00

payroll deduction

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

Mailing Address P.O. Box 111393

City Anchorage State AK Zip Code 99511

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

Name of Employer Horizon Lines Occupation Manager, Port Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
05 / 30 / 2007

Transaction ID: SA11A1.6315

Amount of Each Receipt this Period  
60.00

payroll deduction

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

Mailing Address 73 Paseo De Orguideas

City Trujillo Alto State PR Zip Code 00976

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

Name of Employer Horizon Lines Occupation Manager, Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 30 / 2007

Transaction ID: SA11A1.6262

Amount of Each Receipt this Period  
50.00

payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	210.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or 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"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) Kenneth Gill Mailing Address 2911 Leeward Place City Anchorage State AK Zip Code 99516 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.6255 Amount of Each Receipt this Period 40.00 payroll deduction
Name of Employer: Horizon Lines Occupation: Manager, Business Processes Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Jay Hess Mailing Address 8309 24th Ave Ct NW City Gig Harbor State WA Zip Code 98332 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.6273 Amount of Each Receipt this Period 44.86 payroll deduction
Name of Employer: Horizon Lines Occupation: Senior Vessel Superintendent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 217.55		

<b>C.</b> Full Name (Last, First, Middle Initial) Sabrina M Jackson Mailing Address 3106 Indian Trail Ct City Rowlett State TX Zip Code 75088 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.6282 Amount of Each Receipt this Period 55.00 payroll deduction
Name of Employer: Horizon Lines Occupation: OTC Documenting and Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 266.24		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>139.86</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 / 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

<b>A.</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. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.6301 Amount of Each Receipt this Period 153.17 payroll deduction
Name of Employer: Horizon Services Occupation: Vice president Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 743.95		

<b>B.</b> Full Name (Last, First, Middle Initial) Marv Labrador Mailing Address P.O. Box 8897 City Tamuning State GU Zip Code 96931 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.6300 Amount of Each Receipt this Period 120.00 payroll deduction
Name of Employer: Horizon Lines Occupation: General Manager, Country Mgmt Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 646.20		

<b>C.</b> Full Name (Last, First, Middle Initial) Mike A Lynch Mailing Address P.O. Box 921127 City Dutch Hart State AK Zip Code 99692 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.6316 Amount of Each Receipt this Period 40.00 payroll deduction
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 ▼ 220.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>313.17</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or 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"/> 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

Full Name (Last, First, Middle Initial) <b>A. Ku Park</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 965 Maunawili Cir		Transaction ID: SA11A1.6321	
City State Zip Code Kailua HI 96734-4620	Amount of Each Receipt this Period 49.04		
FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction	
Name of Employer Horizon Lines	Occupation Manager, Government Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.40		

Full Name (Last, First, Middle Initial) <b>B. Way Way P Pee</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 1839 Darnell Circle		Transaction ID: SA11A1.6292	
City State Zip Code Frisco TX 00007	Amount of Each Receipt this Period 86.08		
FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction	
Name of Employer Horizon Llnes	Occupation Manager Applications		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 419.14		

Full Name (Last, First, Middle Initial) <b>C. Charles G. Raymond</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 9015 Winged Bourne Rd		Transaction ID: SA11A1.6256	
City State Zip Code Charlotte NC 28210	Amount of Each Receipt this Period 533.33		
FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction	
Name of Employer Horizon Lines	Occupation President & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2091.66		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	668.45
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

Use separate schedule(s) or 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"/> 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

Full Name (Last, First, Middle Initial) <b>A. Sam Raymond</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 6143 Cedar Croft Drive		Transaction ID: SA11A1.6266	
City State Zip Code Charlotte NC 28266	Amount of Each Receipt this Period 79.73		
FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction	
Name of Employer Horizon Lines	Occupation Manager, Performance Monitoring		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 389.47		

Full Name (Last, First, Middle Initial) <b>B. Dave Rodger</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 149 Blauvelt Ave		Transaction ID: SA11A1.6267	
City State Zip Code Ho Ho Kus NJ 07423	Amount of Each Receipt this Period 42.00		
FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction	
Name of Employer Horizon Lines	Occupation Director, Technical Services		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) <b>C. Domingo Rodriguez</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address PO Box 360945		Transaction ID: SA11A1.6328	
City State Zip Code San Juan PR 00936	Amount of Each Receipt this Period 79.58		
FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction	
Name of Employer Horizon Lines	Occupation Manager, Finance and Accounting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 388.66		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	201.31
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

Use separate schedule(s) or 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"/> 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

Full Name (Last, First, Middle Initial) <b>A.</b> Jose Rodriguez		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address Alturas de Torrimar		Transaction ID: SA11A1.6289	
City State Zip Code San Juan PR 00969	Amount of Each Receipt this Period 56.33		
FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction	
Name of Employer Horizon Lines	Occupation General Manager, Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.17		

Full Name (Last, First, Middle Initial) <b>B.</b> Claudia Stone		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 3 Atwood Avenue		Transaction ID: SA11A1.6271	
City State Zip Code Pompton Plains NJ 07444	Amount of Each Receipt this Period 53.05		
FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction	
Name of Employer Horizon Lines	Occupation Assistant General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.25		

Full Name (Last, First, Middle Initial) <b>C.</b> Brian Taylor		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 150 Kaapuni Drive		Transaction ID: SA11A1.6330	
City State Zip Code Kallua HI 96734	Amount of Each Receipt this Period 220.00		
FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction	
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 ▼ 1075.01		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	329.38
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 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)  
Matthew Urbania

Mailing Address 3034 Shillington Pl

City State Zip Code  
Charlotte NC 28210

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

Name of Employer Horizon Lines Occupation Vice President & CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 830.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.6284

Amount of Each Receipt this Period  
166.00

payroll deduction

**B.** Full Name (Last, First, Middle Initial)  
Duncan Wright

Mailing Address 5411 Vanderbilt Avenue

City State Zip Code  
Dallas TX 75206

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

Name of Employer Horizon Lines Occupation Manager, Marketing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 431.80

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.6276

Amount of Each Receipt this Period  
88.40

payroll deduction

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

Mailing Address 19233 Hidden Cove Lane

City State Zip Code  
Cornelius NC 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 ▼ 835.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.6261

Amount of Each Receipt this Period  
167.00

payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>421.40</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>2866.55</b>

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. ABERCROMBIE FOR CONGRESS**

Mailing Address C/O 1357 KAPIOLANI BLVD 31005

City HONOLULU State HI Zip Code 96814

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: HI District: 01

Transaction ID: SB23.6250

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

2500.00

**B. FRIENDS OF BENNIE THOMPSON**

Mailing Address P.O. Box 100  
P.O. Box 100

City Bolton State MS Zip Code 39041

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: MS District: 02

Transaction ID: SB23.6247

Date of Disbursement

05 / 07 / 2007

Amount of Each Disbursement this Period

2500.00

**C. FRIENDS OF MAZIE HIRONO**

Mailing Address PO BOX 677

City HONOLULU State HI Zip Code 96809

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: HI District: 2

Transaction ID: SB23.6248

Date of Disbursement

05 / 18 / 2007

Amount of Each Disbursement this Period

1000.00

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

6000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. GENE TAYLOR FOR CONGRESS COMMITTEE**

Mailing Address POST OFFICE BOX 3838  
POST OFFICE BOX 38

City BAY ST LOIS State MS Zip Code 39520

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MS District: 04

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.6251

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

2500.00

**B. NATIONAL LEADERSHIP PAC**

Mailing Address PO box 5577

City New York State NY Zip Code 10027

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.6253

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

2500.00

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

5000.00

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

11000.00

**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

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

Outstanding Balance Beginning This Period <input type="text" value="-3770.00"/>	<b>Transaction ID: SD10.4121</b>	
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>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor BSY Associates	Nature of Debt (Purpose): design, production of printed materials
Mailing Address 195 Fairfield Ave. Suite 4D	
City State ZIP Code West Caldwell NJ 07006	

Outstanding Balance Beginning This Period <input type="text" value="3770.00"/>	<b>Transaction ID: SD10.4120</b>	
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>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="0.00"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text" value="0.00"/>
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>