

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

ADDRESS (number and street) 2001 K Street, NW, Suite 400

Attn: W. Farah

Check if different than previously reported. (ACC) WASHINGTON DC 20006

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

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

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

Election on _____ in the State of _____

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

Election on _____ in the State of _____

5. Covering Period 05 01 2011 through 05 31 2011

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 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							
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FEC FORM 3X (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

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

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		63275.67
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	60164.83									
(c) Total Receipts (from Line 19)	1640.20	10605.24								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	61805.03	73880.91								
7. Total Disbursements (from Line 31)	4000.00	16075.88								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	57805.03	57805.03								
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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

Report Covering the Period: From: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	1262.91	4567.47
(ii) Unitemized	377.29	5107.91
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1640.20	9675.38
(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)	1640.20	9675.38
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	37.94
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	891.92
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))	1640.20	10605.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1640.20	10605.24

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	75.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	75.88
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	4000.00	16000.00
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))..	4000.00	16075.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4000.00	16075.88

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)	1640.20	9675.38
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1640.20	9675.38
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	75.88
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	37.94
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	37.94

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 17
(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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

<p>A. Full Name (Last, First, Middle Initial) Michael Avara</p> <p>Mailing Address 1218 Hillshire Meadow Drive</p> <p>City State Zip Code Matthews NC 28105</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Horizon Lines, LLC Occupation: Sr VP, Finance & CFO</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>	<p>Date of Receipt 05 / 19 / 2011</p> <p>Transaction ID: SA11AI.9550</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Contribution</p>
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<p>B. Full Name (Last, First, Middle Initial) Charles Battiato</p> <p>Mailing Address P.O. Box 894715</p> <p>City State Zip Code Mililani HI 96789</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Horizon Lines Occupation: Manager, Sales</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 256.65</p>	<p>Date of Receipt 05 / 19 / 2011</p> <p>Transaction ID: SA11AI.9551</p> <p>Amount of Each Receipt this Period 51.33</p> <p>Contribution</p>
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<p>C. Full Name (Last, First, Middle Initial) Henry Bell</p> <p>Mailing Address 4701 Preston Park Blvd</p> <p>City State Zip Code Plano TX 75093</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Horizon Lines Occupation: Financial Analyst Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt 05 / 19 / 2011</p> <p>Transaction ID: SA11AI.9552</p> <p>Amount of Each Receipt this Period 50.00</p> <p>Contribution</p>
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SUBTOTAL of Receipts This Page (optional)	201.33
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 17
(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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

A.

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

Mailing Address 159 Bergen Street

City State Zip Code
Brooklyn NY 11217

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

Name of Employer Occupation
Horizon Lines Naval Architect

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 229.15

Date of Receipt
MM / DD / YYYY
05 / 19 / 2011

Transaction ID: SA11AI.9555

Amount of Each Receipt this Period
45.83

Contribution

B.

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

Mailing Address 6012 E Mercer Way

City State Zip Code
Mercer Island WA 98040

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

Name of Employer Occupation
Horizon Lines Director, Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 735.40

Date of Receipt
MM / DD / YYYY
05 / 19 / 2011

Transaction ID: SA11AI.9556

Amount of Each Receipt this Period
147.08

Contribution

C.

Full Name (Last, First, Middle Initial)
Erica Compton

Mailing Address 4838 Gurley Ave

City State Zip Code
Dallas TX 75223

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

Name of Employer Occupation
Horizon Lines Manager, Collections

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt
MM / DD / YYYY
05 / 19 / 2011

Transaction ID: SA11AI.9561

Amount of Each Receipt this Period
70.20

Contribution

SUBTOTAL of Receipts This Page (optional) ► **263.11**

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

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

A.	Full Name (Last, First, Middle Initial) Marion G. Davis			Date of Receipt
	Mailing Address 11511 Brayton Drive C1			<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 5 / 2 0 1 1
	City	State	Zip Code	Transaction ID: SA11AI.9562
	Anchorage	AK	98516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C			<input type="text"/> 25.00
Name of Employer Horizon Lines		Occupation Director, operations		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 450.00		

B.	Full Name (Last, First, Middle Initial) Marion G. Davis			Date of Receipt
	Mailing Address 11511 Brayton Drive C1			<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 1 2 / 2 0 1 1
	City	State	Zip Code	Transaction ID: SA11AI.9563
	Anchorage	AK	98516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C			<input type="text"/> 25.00
Name of Employer Horizon Lines		Occupation Director, operations		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 475.00		

C.	Full Name (Last, First, Middle Initial) Marion G. Davis			Date of Receipt
	Mailing Address 11511 Brayton Drive C1			<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 1 9 / 2 0 1 1
	City	State	Zip Code	Transaction ID: SA11AI.9564
	Anchorage	AK	98516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C			<input type="text"/> 25.00
Name of Employer Horizon Lines		Occupation Director, operations		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 500.00		

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

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

A.	Full Name (Last, First, Middle Initial) Marion G. Davis	Date of Receipt MM / DD / YYYY 05 / 26 / 2011
	Mailing Address 11511 Brayton Drive C1	Transaction ID: SA11AI.9565
	City State Zip Code Anchorage AK 98516	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer Horizon Lines	Occupation Director, operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

B.	Full Name (Last, First, Middle Initial) Lori A Galloway	Date of Receipt MM / DD / YYYY 05 / 05 / 2011
	Mailing Address P.O. Box 111393	Transaction ID: SA11AI.9574
	City State Zip Code Anchorage AK 99511	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer Horizon Lines	Occupation Manager, Port Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

C.	Full Name (Last, First, Middle Initial) Lori A Galloway	Date of Receipt MM / DD / YYYY 05 / 12 / 2011
	Mailing Address P.O. Box 111393	Transaction ID: SA11AI.9575
	City State Zip Code Anchorage AK 99511	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer Horizon Lines	Occupation Manager, Port Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

SUBTOTAL of Receipts This Page (optional)	55.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Lori A Galloway		Date of Receipt
	Mailing Address P.O. Box 111393		<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
	Anchorage	AK	99511
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.9576
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"/> 15.00
		<input type="text"/> 300.00	Contribution

B.	Full Name (Last, First, Middle Initial) Lori A Galloway		Date of Receipt
	Mailing Address P.O. Box 111393		<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
	Anchorage	AK	99511
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.9577
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"/> 15.00
		<input type="text"/> 315.00	Contribution

C.	Full Name (Last, First, Middle Initial) James Garrahan		Date of Receipt
	Mailing Address 73 Paseo De Orguideas		<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
	Trujillo Alto	PR	00976
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.9578
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"/> 50.00
		<input type="text"/> 250.00	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 80.00
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 11 / 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Kenneth Gill	Date of Receipt MM / DD / YYYY 05 / 26 / 2011
	Mailing Address 2911 Leeward Place	Transaction ID: SA11AI.9582
	City Anchorage State AK Zip Code 99516	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Contribution
	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 210.00	

B.	Full Name (Last, First, Middle Initial) Sabrina M Jackson	Date of Receipt MM / DD / YYYY 05 / 19 / 2011
	Mailing Address 3106 Indian Trail Ct	Transaction ID: SA11AI.9585
	City Rowlett State TX Zip Code 75088	Amount of Each Receipt this Period 56.65
	FEC ID number of contributing federal political committee. C	Contribution
	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 283.25	

C.	Full Name (Last, First, Middle Initial) Marv Labrador	Date of Receipt MM / DD / YYYY 05 / 05 / 2011
	Mailing Address P.O. Box 8897	Transaction ID: SA11AI.9591
	City Tamuning State GU Zip Code 96931	Amount of Each Receipt this Period 32.31
	FEC ID number of contributing federal political committee. C	Contribution
	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 581.58	

SUBTOTAL of Receipts This Page (optional)	98.96
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

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.		Transaction ID: SA11AI.9592
		Amount of Each Receipt this Period	<input type="text"/> 32.31
Name of Employer Horizon Lines		Occupation General Manager, Country Mgmt	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 613.89	

B.	Full Name (Last, First, Middle Initial) Marv Labrador		Date of Receipt
	Mailing Address P.O. Box 8897		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Tamuning	GU	96931
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.9593
		Amount of Each Receipt this Period	<input type="text"/> 32.31
Name of Employer Horizon Lines		Occupation General Manager, Country Mgmt	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 646.20	

C.	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.		Transaction ID: SA11AI.9594
		Amount of Each Receipt this Period	<input type="text"/> 32.31
Name of Employer Horizon Lines		Occupation General Manager, Country Mgmt	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 678.51	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 96.93
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 / 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Leslie Peters		Date of Receipt
	Mailing Address 21 Shippen Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 2 6 / 2 0 1 1
	City	State	Zip Code
	Flemington	NJ	08822
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9604
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 ▼ 377.00	<input type="text"/> 1.00
Contribution			

B.	Full Name (Last, First, Middle Initial) Claudia Stone		Date of Receipt
	Mailing Address 3 Atwood Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 1 9 / 2 0 1 1
	City	State	Zip Code
	Pompton Plains	NJ	07444
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9611
Name of Employer Horizon Lines		Occupation Representative/ Temp/Misc	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 ▼ 300.00	<input type="text"/> 60.00
Contribution			

C.	Full Name (Last, First, Middle Initial) Brian Taylor		Date of Receipt
	Mailing Address 150 Kaapuni Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 1 9 / 2 0 1 1
	City	State	Zip Code
	Kallua	HI	96734
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9612
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 ▼ 250.00	<input type="text"/> 50.00
Contribution			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 111.00
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 14 / 17
	(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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

A.

Full Name (Last, First, Middle Initial) Michael, Zendan		Date of Receipt MM / DD / YYYY 05 / 19 / 2011
Mailing Address 943 Longfield Circle		Transaction ID: SA11AI.9613
City Charlotte	State NC	Zip Code 28270
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 114.58
Name of Employer Horizon Lines	Occupation VP, Deputy General Counsel	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 572.90	

B.

Full Name (Last, First, Middle Initial) Robert Zuckerman		Date of Receipt MM / DD / YYYY 05 / 19 / 2011
Mailing Address 19233 Hidden Cove Lane		Transaction ID: SA11AI.9614
City Cornelius	State NC	Zip Code 28031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 167.00
Name of Employer Horizon Lines	Occupation VP Legal	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 835.00	

SUBTOTAL of Receipts This Page (optional)	281.58
TOTAL This Period (last page this line number only)	1262.91

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

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

A. CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)

CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Transaction ID: SB23.9615

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	1

Mailing Address PO BOX 1631

Amount of Each Disbursement this Period

1000.00

City BALTIMORE State MD Zip Code 21203

Purpose of Disbursement Contribution

Category/Type

Candidate Name ELIJAH E CUMMINGS

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: MD District: 07

B. FRIENDS OF MAZIE HIRONO

Full Name (Last, First, Middle Initial)

FRIENDS OF MAZIE HIRONO

Transaction ID: SB23.9624

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	1	1

Mailing Address PO BOX 677

Amount of Each Disbursement this Period

1000.00

City HONOLULU State HI Zip Code 96809

Purpose of Disbursement Contribution

Category/Type

Candidate Name MAZIE K HIRONO

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: HI District: 00

C. PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN

Full Name (Last, First, Middle Initial)

PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN

Transaction ID: SB23.9633

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	1	1

Mailing Address PO BOX 3662

Amount of Each Disbursement this Period

-1500.00

City SEATTLE State WA Zip Code 98124

Purpose of Disbursement Vacating contribution erroneously reported on 11/14/07.

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: WA District: 00

SUBTOTAL of Disbursements This Page (optional) ►

500.00

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<p>A. Full Name (Last, First, Middle Initial) PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN</p> <p>Mailing Address PO BOX 3662</p> <p>City SEATTLE State WA Zip Code 98124</p> <p>Purpose of Disbursement Vacating contribution erroneously reported on 11/14/07.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.9634 Date of Disbursement 05 / 08 / 2011</p> <p>Amount of Each Disbursement this Period -1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) ROB WITTMAN FOR CONGRESS</p> <p>Mailing Address P.O. BOX 999</p> <p>City MONTROSS State VA Zip Code 22520</p> <p>Purpose of Disbursement contribution</p> <p>Candidate Name ROBERT J WITTMAN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 01</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.9627 Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) TFP-FOJB COMMITTEE</p> <p>Mailing Address 631-B PENNSYLVANIA AVENUE SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.9622 Date of Disbursement 05 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional) ►

2500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 17

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

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NAME OF COMMITTEE (In Full)

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

A. Full Name (Last, First, Middle Initial)
TIM BISHOP FOR CONGRESS

Mailing Address PO BOX 437

City FARMINGVILLE State NY Zip Code 11738

Purpose of Disbursement
Contribution

Candidate Name
TIMOTHY BISHOP

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 01

Transaction ID: SB23.9618

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2011

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) ►

4000.00