

# 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 (12G)  
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 04 01 2004 through 06 30 2004

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 10 05 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	4

D	D
0	1

Y	Y	Y	Y
2	0	0	4

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	4

	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>4</td></tr></table>	Y	Y	Y	Y	2	0	0	4		1126.28
Y	Y	Y	Y							
2	0	0	4							
(b) Cash on Hand at Beginning of Reporting Period .....	5847.94									
(c) Total Receipts (from Line 19) .....	6042.67	18540.30								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	11890.61	19666.58								
7. Total Disbursements (from Line 31) .....	3500.00	11275.97								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	8390.61	8390.61								
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: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	4

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	4

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	3935.63	14245.22
(i) Itemized (use Schedule A) .....	2107.04	4295.08
(ii) Unitemized .....	6042.67	18540.30
(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) .....	6042.67	18540.30
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)) .....	6042.67	18540.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	6042.67	18540.30

**DETAILED SUMMARY PAGE**

of Disbursements

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	6775.97
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	6775.97
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	4500.00
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))..	3500.00	11275.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	3500.00	11275.97

**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) .....	6042.67	18540.30
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6042.67	18540.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	6775.97
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	6775.97

**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 / 13
	<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)  
Eric Britten

Mailing Address 17530 Steamboat Dr

City Anchorage State AK Zip Code 99516

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 ▼ 300.00

Date of Receipt  
06 / 30 / 2004

Transaction ID: SA11A1.4270

Amount of Each Receipt this Period  
195.00

payroll deductions

**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. **C**

Name of Employer Horizon Lines Occupation Director, Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 463.76

Date of Receipt  
06 / 30 / 2004

Transaction ID: SA11A1.4271

Amount of Each Receipt this Period  
349.53

payroll deductions

**C.** Full Name (Last, First, Middle Initial)  
Denise Corbett

Mailing Address 9714 Shoal Creek Drive

City Rowlett State TX Zip Code 75089

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

Name of Employer Horizon Lines Occupation Director Human Resources

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 405.32

Date of Receipt  
06 / 30 / 2004

Transaction ID: SA11A1.4278

Amount of Each Receipt this Period  
246.06

payroll deductions

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>790.59</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 7 / 13
	<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

<b>A.</b> Full Name (Last, First, Middle Initial) Marion G. Davis		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 4	
Mailing Address 11511 Brayton Drive C1		<b>Transaction ID:</b> SA11A1.4280	
City Anchorage	State AK	Zip Code 98516	Amount of Each Receipt this Period 325.00
FEC ID number of contributing federal political committee. <b>C</b>		payroll deductions	
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 ▼ 450.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Kelly Dennison		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 4	
Mailing Address 4409 Mariannes Ridge Road		<b>Transaction ID:</b> SA11A1.4282	
City Charlotte	State NC	Zip Code 28273	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>		payroll deductions	
Name of Employer Horizon Lines	Occupation Director, Corp Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Rich Kessler		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 4	
Mailing Address 3123 Overlook Circle		<b>Transaction ID:</b> SA11A1.4288	
City Hilland Village	State TX	Zip Code 75077	Amount of Each Receipt this Period 386.25
FEC ID number of contributing federal political committee. <b>C</b>		payroll deductions	
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 ▼ 762.50		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1011.25
<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 / 13
	<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)  
Edward R Lagoy

Mailing Address 555 S Renton Village Pl Ste 60

City Renton State WA Zip Code 98055

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

Name of Employer Horizon Lines Occupation General Manager, Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
06 / 30 / 2004

Transaction ID: SA11A1.4289

Amount of Each Receipt this Period  
300.00

payroll deductions

**B.** Full Name (Last, First, Middle Initial)  
Dennis McCarthy

Mailing Address 7002 Seton House Lane

City Charlotte State NC Zip Code 28277

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

Name of Employer Horizon Lines Occupation Staff VP Human resources

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 318.14

Date of Receipt  
06 / 30 / 2004

Transaction ID: SA11A1.4291

Amount of Each Receipt this Period  
193.14

payroll deductions

**C.** Full Name (Last, First, Middle Initial)  
John Orton

Mailing Address 6334 Burlwood Road

City Charlotte State NC Zip Code 28211

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

Name of Employer Horizon Lines Occupation Marketing Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
06 / 30 / 2004

Transaction ID: SA11A1.4294

Amount of Each Receipt this Period  
135.00

payroll deductions

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	628.14
<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 / 13
	<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. Charles G. Raymond</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2004	
Mailing Address 9015 Winged Bourne Rd		<b>Transaction ID: SA11A1.4297</b>	
City State Zip Code Charlotte NC 28210	Amount of Each Receipt this Period 1250.01		
FEC ID number of contributing federal political committee. C	payroll deductions		
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 ▼ 2083.35		

Full Name (Last, First, Middle Initial) <b>B. Domingo Rondriquez</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2004	
Mailing Address P.O. Box 360945		<b>Transaction ID: SA11A1.4300</b>	
City State Zip Code San Juan PR 00936	Amount of Each Receipt this Period 215.64		
FEC ID number of contributing federal political committee. C	payroll deductions		
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 ▼ 284.97		

Full Name (Last, First, Middle Initial) <b>C. Duane Smith</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2004	
Mailing Address 20342 NE 34th Ct		<b>Transaction ID: SA11A1.4304</b>	
City State Zip Code Sammamish WA 98074	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C	payroll deductions		
Name of Employer Horizon Lnes	Occupation General Manager Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1505.65
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	3935.63

**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 10 / 13

<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: 2004  
 Primary  General  
 Other (specify) ▼

State: HI District: 01

Transaction ID: SB23.4249

Date of Disbursement

05 / 14 / 2004

Amount of Each Disbursement this Period

1000.00

**B. ALASKANS FOR DON YOUNG**

Mailing Address PO Box 100298

City Anchorage State AK Zip Code 99510

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2004  
 Primary  General  
 Other (specify) ▼

State: AK District: 00

Transaction ID: SB23.4250

Date of Disbursement

05 / 20 / 2004

Amount of Each Disbursement this Period

1000.00

**C. Crenshaw for Congress**

Mailing Address 5345 ORTEGA BOULEVARD SUITE 11

City JACKSONVILLE State FL Zip Code 32210

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2004  
 Primary  General  
 Other (specify) ▼

State: FL District: 04

Transaction ID: SB23.4251

Date of Disbursement

05 / 14 / 2004

Amount of Each Disbursement this Period

1000.00

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

3000.00

**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 11 / 13

<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.** Robert G. WHittel for Congress

Mailing Address PO BOX 10035

City BROOKSVILLE State FL Zip Code 34603

Purpose of Disbursement

Candidate Name  
Robert G. WHittel for Congress

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2004  
 Primary  General  
 Other (specify) ▼

State: FL District: 05

Transaction ID: SB23.4255

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

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

500.00

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

3500.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 12 / 13
	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"/>

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

Image# 27931293947

Form/Schedule: SA11A1      This contributor makes contribuions by payroll deduction. This report and reports in 2004, 2005, and 2006 have  
Transaction ID: SA11A1.4297      been amended to reflect the date of receipt for these contributions as the actual date of payroll deduction,  
rather than the date of deposit into the committee's bank account. These corrections will not change the ag-  
gregate contributions for this contributor. The purpose of these amendments is to ensure that contributions  
from this contributor will appear in the month in which they actually were deducted from his check.

\*\*\*\*\*