

# 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 11 02 2004 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 10 01 2004 through 10 13 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
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	4

 To: 

M	M
1	0

D	D
1	3

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 .....	16008.17									
(c) Total Receipts (from Line 19) .....	83.91	26241.77								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	16092.08	27368.05								
7. Total Disbursements (from Line 31) .....	1000.00	12275.97								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	15092.08	15092.08								
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
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	4

 To: 

M	M
1	0

D	D
1	3

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	70.27	14315.49
(i) Itemized (use Schedule A) .....	13.64	4308.72
(ii) Unitemized .....	83.91	18624.21
(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) .....	83.91	18624.21
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	7617.56
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)) .....	83.91	26241.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	83.91	26241.77

**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	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.....	1000.00	5500.00
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))..	1000.00	12275.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	1000.00	12275.97

**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) .....	83.91	18624.21
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	83.91	18624.21
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 / 9
	<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:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 326.76

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 0 4

Transaction ID: SA11A1.4414

Amount of Each Receipt this Period  
9.80

payroll deduction

**B.** Full Name (Last, First, Middle Initial)  
Eric Britten

Mailing Address 17530 Steamboat Dr

City State Zip Code  
Anchorage AK 99516

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

Name of Employer Occupation  
Horizon Lines Manager, Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 0 4

Transaction ID: SA11A1.4412

Amount of Each Receipt this Period  
15.00

payroll deduction

**C.** Full Name (Last, First, Middle Initial)  
Marion G. Davis

Mailing Address 11511 Brayton Drive C1

City State Zip Code  
Anchorage AK 98516

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

Name of Employer Occupation  
Horizon Lines Director, operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 825.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 0 4

Transaction ID: SA11A1.4417

Amount of Each Receipt this Period  
25.00

payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	49.80
<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: <span style="float: right;">PAGE 7 / 9</span>	
	(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

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)  
Marv Labrador

Mailing Address P.O. Box 8897

City	State	Zip Code
Tamuning	GU	96931

FEC ID number of contributing federal political committee. C

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 ▼ <span style="border: 1px solid black; padding: 2px;">225.17</span>
---	--

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	0	4

Transaction ID: SA11A1.4411

Amount of Each Receipt this Period  
20.47

payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">20.47</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;">70.27</span>

**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 8 / 9

<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

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

Full Name (Last, First, Middle Initial)

**A.** Friends of Ernest Istook

Mailing Address 712 NORTH BROADWAY AVENUE  
3501 N.W. 63rd Street Suite 601

City OKLAHOMA CITY State OK Zip Code 73102

Purpose of Disbursement  
Friends of Ernest Istook

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2004  
 Primary  General  
 Other (specify) ▼

State: OK District: 05

Transaction ID: SB23.4408

Date of Disbursement

10 / 01 / 2004

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

1000.00



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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 9 / 9
	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 -3770.00	<b>Transaction ID: SD10.4121</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period -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 3770.00	<b>Transaction ID: SD10.4120</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3770.00

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