

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) 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)
Attn: W. Farah
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 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 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 04 / 01 / 2014 through 04 / 30 / 2014

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 Mark Blankenship [Electronically Filed] Date 05 / 12 / 2014

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**

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Page 2

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: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="30998.11"/>	<input type="text" value="30998.11"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="32891.87"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="921.11"/>	<input type="text" value="3814.87"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="33812.98"/>	<input type="text" value="34812.98"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0.00"/>	<input type="text" value="1000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="33812.98"/>	<input type="text" value="33812.98"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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).....	549.13	1210.13
(ii) Unitemized	371.98	2604.74
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	921.11	3814.87
(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)	921.11	3814.87
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 Transfers (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))..... ▶	921.11	3814.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	921.11	3814.87

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	1000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	1000.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	921.11	3814.87
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	921.11	3814.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 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 Gov't Fund (Horizon Lines Associates Good Gov't Fund)

A. Marvin Buchanan
Full Name (Last, First, Middle Initial)
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 VP, Sales & Mktg, Alaska
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **613.68**

Date of Receipt **04 / 26 / 2014**
Transaction ID : SA11AI.11757
Amount of Each Receipt this Period **153.42**
contribution

B. Marion G. Davis
Full Name (Last, First, Middle Initial)
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 VP And General Mgr, Alaska
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **350.00**

Date of Receipt **04 / 03 / 2014**
Transaction ID : SA11AI.11722
Amount of Each Receipt this Period **25.00**
contribution

C. Marion G. Davis
Full Name (Last, First, Middle Initial)
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 VP And General Mgr, Alaska
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **375.00**

Date of Receipt **04 / 10 / 2014**
Transaction ID : SA11AI.11730
Amount of Each Receipt this Period **25.00**
contribution

SUBTOTAL of Receipts This Page (optional)..... **203.42**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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)

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

Mailing Address 11511 Brayton Drive C1

City Anchorage	State AK	Zip Code 98516
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FEC ID number of contributing federal political committee. **C**

Name of Employer Horizon Lines	Occupation VP And General Mgr, Alaska
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2014

Transaction ID : SA11AI.11738

Amount of Each Receipt this Period

25.00

contribution

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

Mailing Address 11511 Brayton Drive C1

City Anchorage	State AK	Zip Code 98516
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FEC ID number of contributing federal political committee. **C**

Name of Employer Horizon Lines	Occupation VP And General Mgr, Alaska
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2014

Transaction ID : SA11AI.11746

Amount of Each Receipt this Period

25.00

contribution

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

Mailing Address P.O. Box 111393

City Anchorage	State AK	Zip Code 99511
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FEC ID number of contributing federal political committee. **C**

Name of Employer Horizon Lines	Occupation Manager, Port Operations
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2014

Transaction ID : SA11AI.11725

Amount of Each Receipt this Period

15.00

contribution

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 8 OF 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	<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)

Full Name (Last, First, Middle Initial) A. Lori A Galloway			Date of Receipt MM / DD / YYYY 04 / 10 / 2014 Transaction ID : SA11AI.11733
Mailing Address P.O. Box 111393			Amount of Each Receipt this Period 15.00 contribution
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) B. Lori A Galloway			Date of Receipt MM / DD / YYYY 04 / 17 / 2014 Transaction ID : SA11AI.11741
Mailing Address P.O. Box 111393			Amount of Each Receipt this Period 15.00 contribution
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Lori A Galloway			Date of Receipt MM / DD / YYYY 04 / 24 / 2014 Transaction ID : SA11AI.11749
Mailing Address P.O. Box 111393			Amount of Each Receipt this Period 15.00 contribution
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00		

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 9 OF 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	

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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. Sabrina M Jackson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3106 Indian Trail Ct
 City Rowlett State TX Zip Code 75088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Horizon Lines Occupation OTC Documenting and Finance
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **234.52**

Date of Receipt **04 / 26 / 2014**
Transaction ID : SA11Al.11759
 Amount of Each Receipt this Period **58.63**
 contribution

B. Claudia Stone
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 Atwood Avenue
 City Pompton Plains State NJ Zip Code 07444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Horizon Lines Occupation Associate General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **04 / 26 / 2014**
Transaction ID : SA11Al.11766
 Amount of Each Receipt this Period **62.50**
 contribution

C. Michael Zendan
 Full Name (Last, First, Middle Initial)
 Mailing Address 943 Longfield Circle
 City Charlotte State NC Zip Code 28270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Horizon Lines Occupation Executive Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **458.32**

Date of Receipt **04 / 26 / 2014**
Transaction ID : SA11Al.11767
 Amount of Each Receipt this Period **114.58**
 contribution

SUBTOTAL of Receipts This Page (optional).....	235.71
TOTAL This Period (last page this line number only).....	549.13