

# 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 CITY STATE ZIP CODE

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 11 02 2004 in the State of

5. Covering Period 10 14 2004 through 11 22 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.

Office Use Only									
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**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
1	4

Y	Y	Y	Y
2	0	0	4

 To: 

M	M
1	1

D	D
2	2

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 .....	15092.08									
(c) Total Receipts (from Line 19) .....	4913.61	31155.38								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	20005.69	32281.66								
7. Total Disbursements (from Line 31) .....	931.15	13207.12								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	19074.54	19074.54								
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
1	4

Y	Y	Y	Y
2	0	0	4

 To: 

M	M
1	1

D	D
2	2

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	3922.43	18237.92
(i) Itemized (use Schedule A) .....	991.18	5299.90
(ii) Unitemized .....	4913.61	23537.82
(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) .....	4913.61	23537.82
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)) .....	4913.61	31155.38
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	4913.61	31155.38

**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.....	931.15	6431.15
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))..	931.15	13207.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	931.15	13207.12

**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) .....	4913.61	23537.82
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4913.61	23537.82
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 / 25
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> William H Alverson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 4
Mailing Address 1094 Touriga Place		Transaction ID: SA11A1.4423
City Pleasanton State CA Zip Code 94566	Amount of Each Receipt this Period 39.46	
FEC ID number of contributing federal political committee. <b>C</b>		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 ▼ 314.53	

Full Name (Last, First, Middle Initial) <b>B.</b> William H Alverson		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 4
Mailing Address 1094 Touriga Place		Transaction ID: SA11A1.4425
City Pleasanton State CA Zip Code 94566	Amount of Each Receipt this Period 39.46	
FEC ID number of contributing federal political committee. <b>C</b>		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 ▼ 353.99	

Full Name (Last, First, Middle Initial) <b>C.</b> Charles Battiato		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 4
Mailing Address P.O. Box 894715		Transaction ID: SA11A1.4427
City Mililani State HI Zip Code 96789	Amount of Each Receipt this Period 18.16	
FEC ID number of contributing federal political committee. <b>C</b>		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 ▼ 344.92	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	97.08
<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 / 25
	<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"/>	<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 Battiato</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 4
Mailing Address P.O. Box 894715		Transaction ID: SA11A1.4428
City Mililani	State HI	Zip Code 96789
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 36.32
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 ▼ 381.24	

payroll deduction

Full Name (Last, First, Middle Initial) <b>B. Patricia Bowman</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 4
Mailing Address 2509 Landing View Lane		Transaction ID: SA11A1.4435
City Charlotte	State NC	Zip Code 28277
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Horizon Lines	Occupation Director Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

payroll deduction

Full Name (Last, First, Middle Initial) <b>C. Patricia Bowman</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 4
Mailing Address 2509 Landing View Lane		Transaction ID: SA11A1.4436
City Charlotte	State NC	Zip Code 28277
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Horizon Lines	Occupation Director Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	96.32
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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 / 25
	<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) 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 1 0 / 1 5 / 2 0 0 4 <b>Transaction ID:</b> SA11A1.4440 Amount of Each Receipt this Period 30.00 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 ▼ 555.00		

<b>B.</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 1 1 / 1 6 / 2 0 0 4 <b>Transaction ID:</b> SA11A1.4441 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 ▼ 615.00		

<b>C.</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 1 0 / 1 5 / 2 0 0 4 <b>Transaction ID:</b> SA11A1.4442 Amount of Each Receipt this Period 117.65 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 ▼ 934.36		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>207.65</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 9 / 25
	<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) 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 1 1 / 1 6 / 2 0 0 4 <b>Transaction ID:</b> SA11A1.4443 Amount of Each Receipt this Period 117.65 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 ▼ 1052.01		

<b>B.</b> 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. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 4 <b>Transaction ID:</b> SA11A1.4452 Amount of Each Receipt this Period 82.02 payroll deduction
Name of Employer: Horizon Lines   Occupation: Director Human Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 733.40		

<b>C.</b> 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. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 4 <b>Transaction ID:</b> SA11A1.4453 Amount of Each Receipt this Period 82.02 payroll deduction
Name of Employer: Horizon Lines   Occupation: Director Human Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 815.42		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>281.69</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 10 / 25
	<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)  
Tricia Anne Covais-Perhirin

Mailing Address 901 Autumn Ridge Road

City State Zip Code  
McKinney TX 75070

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

Name of Employer Occupation  
Horizon Lines Director, Information Systems

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 381.27

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 0 4

Transaction ID: SA11A1.4454

Amount of Each Receipt this Period  
47.92

payroll deduction

**B.** Full Name (Last, First, Middle Initial)  
Tricia Anne Covais-Perhirin

Mailing Address 901 Autumn Ridge Road

City State Zip Code  
McKinney TX 75070

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

Name of Employer Occupation  
Horizon Lines Director, Information Systems

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 429.19

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 4

Transaction ID: SA11A1.4455

Amount of Each Receipt this Period  
47.92

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 ▼ 875.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 0 4

Transaction ID: SA11A1.4456

Amount of Each Receipt this Period  
50.00

payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	145.84
<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 / 25
	<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 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 ▼ 975.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 16 / 2004

Transaction ID: SA11A1.4457

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 State Zip Code  
Charlotte NC 28273

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

Name of Employer Occupation  
Horizon Lines Director, Corp Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2004

Transaction ID: SA11A1.4460

Amount of Each Receipt this Period  
100.00

payroll deduction

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

Mailing Address 4409 Mariannes Ridge Road

City State Zip Code  
Charlotte NC 28273

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

Name of Employer Occupation  
Horizon Lines Director, Corp Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 16 / 2004

Transaction ID: SA11A1.4461

Amount of Each Receipt this Period  
100.00

payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	300.00
<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 12 / 25
<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) Dan Downes Mailing Address 12956 Se 301st St City Auburn State WA Zip Code 98092 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 4 <b>Transaction ID:</b> SA11A1.4463 Amount of Each Receipt this Period 42.92 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 ▼ 214.60		

<b>B.</b> Full Name (Last, First, Middle Initial) Kevin Gill Mailing Address 7522 Seton House Lane City Charlotte State NC Zip Code 28277 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 4 <b>Transaction ID:</b> SA11A1.4469 Amount of Each Receipt this Period 25.00 payroll deduction
Name of Employer: Horizon Lines Occupation: Director Tradelanes Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Kevin Gill Mailing Address 7522 Seton House Lane City Charlotte State NC Zip Code 28277 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 4 <b>Transaction ID:</b> SA11A1.4471 Amount of Each Receipt this Period 25.00 payroll deduction
Name of Employer: Horizon Lines Occupation: Director Tradelanes Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>92.92</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 13 / 25
	<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) Claudette Hilbun Mailing Address 1413 Swallow Circle City State Zip Code Lewisville TX 75077 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 4 <b>Transaction ID:</b> SA11A1.4474 Amount of Each Receipt this Period 30.00 payroll deduction
Name of Employer Occupation Horizon lines Director, Finance and Accounting Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 270.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Claudette Hilbun Mailing Address 1413 Swallow Circle City State Zip Code Lewisville TX 75077 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 4 <b>Transaction ID:</b> SA11A1.4475 Amount of Each Receipt this Period 30.00 payroll deduction
Name of Employer Occupation Horizon lines Director, Finance and Accounting Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Rich Kessler Mailing Address 3123 Overlook Circle City State Zip Code Hilland Village TX 75077 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 4 <b>Transaction ID:</b> SA11A1.4480 Amount of Each Receipt this Period 128.75 payroll deduction
Name of Employer Occupation Horizon Services Vice president Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1277.50		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	188.75
<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 / 25
	<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)  
Rich Kessler

Mailing Address 3123 Overlook Circle

City Hilland Village State TX Zip Code 75077

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

Name of Employer Horizon Services Occupation Vice president

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1406.25

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	4

Transaction ID: SA11A1.4481

Amount of Each Receipt this Period  

128.75
--------

payroll deduction

**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. **C**

Name of Employer Horizon Lines Occupation General Manager, Country Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 266.11

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	0	4

Transaction ID: SA11A1.4482

Amount of Each Receipt this Period  

40.94
-------

payroll deduction

**C.** 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. **C**

Name of Employer Horizon Lines Occupation General Manager, Country Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 347.99

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	4

Transaction ID: SA11A1.4483

Amount of Each Receipt this Period  

81.88
-------

payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>251.57</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 15 / 25
	<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

Full Name (Last, First, Middle Initial) <b>A. Edward R Lagoy</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 4
Mailing Address 555 S Renton Village Pl Ste 60		Transaction ID: SA11A1.4484
City State Zip Code Renton WA 98055	Amount of Each Receipt this Period 100.00	
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 ▼ 700.00	

Full Name (Last, First, Middle Initial) <b>B. Edward R Lagoy</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 4
Mailing Address 555 S Renton Village Pl Ste 60		Transaction ID: SA11A1.4485
City State Zip Code Renton WA 98055	Amount of Each Receipt this Period 100.00	
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 ▼ 800.00	

Full Name (Last, First, Middle Initial) <b>C. Dennis McCarthy</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 4
Mailing Address 7002 Seton House Lane		Transaction ID: SA11A1.4486
City State Zip Code Charlotte NC 28277	Amount of Each Receipt this Period 64.38	
FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction
Name of Employer Horizon Lines	Occupation Staff VP Human resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.66	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	264.38
<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 16 / 25
	<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)  
Dennis McCarthy

Mailing Address 7002 Seton House Lane

City State Zip Code  
Charlotte NC 28277

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

Name of Employer Occupation  
Horizon Lines Staff VP Human resources

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 640.04

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 4

Transaction ID: SA11A1.4487

Amount of Each Receipt this Period  
64.38

payroll deduction

**B.** Full Name (Last, First, Middle Initial)  
Lecia Mimura

Mailing Address 98-1613 NAHELE STREET

City State Zip Code  
Aiea HI 96701

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

Name of Employer Occupation  
Horizon Lines Supervisor, Documentation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 4

Transaction ID: SA11A1.4488

Amount of Each Receipt this Period  
250.00

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

Mailing Address 6334 Burlwood Road

City State Zip Code  
Charlotte NC 28211

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

Name of Employer Occupation  
Horizon Lines Marketing Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 0 4

Transaction ID: SA11A1.4489

Amount of Each Receipt this Period  
45.00

payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>359.38</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 17 / 25
	<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)  
John Orton

Mailing Address 6334 Burlwood Road

City State Zip Code  
Charlotte NC 28211

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

Name of Employer Occupation  
Horizon Lines Marketing Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 4

Transaction ID: SA11A1.4490

Amount of Each Receipt this Period  
45.00

payroll deduction

**B.** Full Name (Last, First, Middle Initial)  
John J Quan

Mailing Address 703 Lindsey Avenue

City State Zip Code  
Winfield IL 06019

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

Name of Employer Occupation  
Horizon Lines General manager, sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 4

Transaction ID: SA11A1.4497

Amount of Each Receipt this Period  
20.00

payroll deduction

**C.** Full Name (Last, First, Middle Initial)  
Charles G. Raymond

Mailing Address 9015 Winged Bourne Rd

City State Zip Code  
Charlotte NC 28210

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

Name of Employer Occupation  
Horizon Lines President & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3916.67

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 4

Transaction ID: SA11A1.4498

Amount of Each Receipt this Period  
458.33

payroll deduction monthly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	523.33
<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 18 / 25
	<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. Samuel Raymond</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 4	
Mailing Address 6143 Cedar Croft Drive		Transaction ID: SA11A1.4499	
City State Zip Code Charlotte NC 28266	Amount of Each Receipt this Period 60.68		
FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction	
Name of Employer Horizon Llnes	Occupation Manager, Performance Monitoring		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.92		

Full Name (Last, First, Middle Initial) <b>B. Samuel Raymond</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 4	
Mailing Address 6143 Cedar Croft Drive		Transaction ID: SA11A1.4501	
City State Zip Code Charlotte NC 28266	Amount of Each Receipt this Period 60.08		
FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction	
Name of Employer Horizon Llnes	Occupation Manager, Performance Monitoring		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>C. Domingo Rondriquez</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 4	
Mailing Address P.O. Box 360945		Transaction ID: SA11A1.4509	
City State Zip Code San Juan PR 00936	Amount of Each Receipt this Period 71.88		
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 ▼ 572.49		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	192.64
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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 19 / 25
	<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. Domingo Rodriguez</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 4	
Mailing Address P.O. Box 360945		Transaction ID: SA11A1.4510	
City San Juan	State PR	Zip Code 00936	Amount of Each Receipt this Period 71.88
FEC ID number of contributing federal political committee. C		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 ▼ 644.37		

Full Name (Last, First, Middle Initial) <b>B. Claudia Stone</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 4	
Mailing Address 3 Atwood Avenue		Transaction ID: SA11A1.4513	
City Pompton Plains	State NJ	Zip Code 07444	Amount of Each Receipt this Period 51.50
FEC ID number of contributing federal political committee. C		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 ▼ 206.00		

Full Name (Last, First, Middle Initial) <b>C. Claudia Stone</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 4	
Mailing Address 3 Atwood Avenue		Transaction ID: SA11A1.4514	
City Pompton Plains	State NJ	Zip Code 07444	Amount of Each Receipt this Period 51.50
FEC ID number of contributing federal political committee. C		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 ▼ 257.50		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	174.88
<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 20 / 25
	<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)  
Gary Tanghe

Mailing Address 1245 Crescent Avenue

City Anchorage State AK Zip Code 99508

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 ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 1 / 1 6 / 2 0 0 4

Transaction ID: SA11A1.4516

Amount of Each Receipt this Period  
 20.00

payroll deduction

**B.** Full Name (Last, First, Middle Initial)  
Francisco Tollinche

Mailing Address Aa-6 Azalea St, Alt Borinquen Gard

City Rio Piedras State PR Zip Code 00926

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

Name of Employer Horizon Llnes Occupation Outside Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 1 5 / 2 0 0 4

Transaction ID: SA11A1.4517

Amount of Each Receipt this Period  
 30.00

payroll deduction

**C.** Full Name (Last, First, Middle Initial)  
Francisco Tollinche

Mailing Address Aa-6 Azalea St, Alt Borinquen Gard

City Rio Piedras State PR Zip Code 00926

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

Name of Employer Horizon Llnes Occupation Outside Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 1 / 1 6 / 2 0 0 4

Transaction ID: SA11A1.4518

Amount of Each Receipt this Period  
 30.00

payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	80.00
<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 21 / 25
	<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

Full Name (Last, First, Middle Initial) <b>A. Matthew Urbania</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 4
Mailing Address 3034 Shillington Place		Transaction ID: SA11A1.4521
City State Zip Code Charlotte NC 28210	Amount of Each Receipt this Period 166.00	
FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction
Name of Employer Horizon Lines	Occupation VP & CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 830.00	

Full Name (Last, First, Middle Initial) <b>B. Matthew Urbania</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 4
Mailing Address 3034 Shillington Place		Transaction ID: SA11A1.4522
City State Zip Code Charlotte NC 28210	Amount of Each Receipt this Period 166.00	
FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction
Name of Employer Horizon Lines	Occupation VP & CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 996.00	

Full Name (Last, First, Middle Initial) <b>C. Robert Zuckerman</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 4
Mailing Address 19233 Hidden Cove Lane		Transaction ID: SA11A1.4523
City State Zip Code Cornelius NC 28031	Amount of Each Receipt this Period 167.00	
FEC ID number of contributing federal political committee. <b>C</b>		payroll deduction
Name of Employer Horizon Lines	Occupation VP Legal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 668.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	499.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 22 / 25	
	(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"/> 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)  
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 835.00
---	------------------------------------

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2004

Transaction ID: SA11A1.4524

Amount of Each Receipt this Period  
167.00

payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	167.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	3922.43

**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 23 / 25

<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.** Ferraris Italian Villa

Mailing Address 14831 Miday Road

City Addison State TX Zip Code 75001

Purpose of Disbursement  
in-kind for cost of meal

Candidate Name  
First Freedoms Fund

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23.4527

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 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

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



Form/Schedule: SA11A1      This contributor makes contribuions by payroll deduction. This report and reports in 2004, 2005, and 2006 have  
Transaction ID: SA11A1.4498      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.