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Image# NOTIFICATION OF MULTICANDIDATE STATUS

(See reverse side for instructions) This form should be filed after the Committee qualifies as a multicandidate committee. 1. (a) NAME OF COMMITTEE IN FULL AmSurg Corp. Good Government Fund (b) Number and Street Address 20 Burton Hills Blvd. 2. FEC IDENTIFICATION NUMBER C00484410 Suite 500 (c) City, State and ZIP Code TYPE OF COMMITTEEcheck one) STATE PARTY Nashville ΤN 37215 X OTHER I certify that **one** of the following situations is correct (complete line 4 or 5): STATUS BY AFFILIATION: The committee submitted its Statement of Organization (FEC FORM 1) and simultaneously qualified as a multicandidate committee through its affiliation with: Committee Name: FEC Identification Number: STATUS BY QUALIFICATION: 5. (a) candidates: The committee has made contributions to the five (5) federal candidates listed below (ONLY state party committees may leave this blank.): Name Office Sought State/District **Date** (i) 03/04/2011 Bill Cassidy House LA 06 (ii) Thomas E. Price 06 03/04/2011 House GΑ (iii) John B. Larson House CT 01 04/06/2011 (iv) Marsha Blackburn 05/09/2011 House TN 07 (v) Ben Cardin MD 06/24/2011 Senate (b) Contributors: The committee received a contribution from its 51st contributor 06/30/2011 Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 06/04/2010 (d) Qualification: The committee met the above requirements on: 06/30/2011 I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete. TYPE OR PRINT NAME OF TREASURER DATE SIGNATURE OF TREASURER Electronically Filed by Thomas M. Sloan, Jr. 09/21/2011 Thomas M. Sloan, Jr. Text ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. For further information contact:

For turther information contact:
Federal Election Commission, Washington, DC 20463
Toll-free 800-424-9530
Local 202-694-1100

FEC FORM 1 M
Revised 1/2001