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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full) — USE FEC MAILING LABEL OR TYPE OR PRINT ▼ — Example: If typing, type over the lines

Anesthesia Service Medical Group Good Gov't Fund - Federal

ADDRESS (number and street) ▼ — 7185 Navajo Road, Suite L

Check if different than previously reported. (ACC)

San Diego | CA | 92119

2. FEC IDENTIFICATION NUMBER ▼ — CITY ▲ — STATE ▲ — ZIPCODE ▲

C00218184

3. IS THIS REPORT X 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)

X 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 11 23 2004 through 12 31 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 C. April Baling, CPA

Signature of Treasurer [signature] Date 01 19 2005

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

FEC FORM 3X (Rev. 02/2005)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 03/2003)

Write or Type Committee Name
Anesthesia Service Medical Group Good Gov't Fund - Federal

Report Covering the Period: From: 11 23 2004 To: 12 31 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2004		1003.59
(b) Cash on Hand at Begining of Reporting Period	10541.72	
(c) Total Receipts (from Line 19)	4340.00	26715.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	14881.72	27718.59
7. Total Disbursements (from Line 31)	221.57	13058.44
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	14660.15	14660.15
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	0.00	

X 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

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name
Anesthesia Service Medical Group Good Gov't Fund - Federal

Report Covering the Period: From: 11 23 2004 To: 12 31 2004

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)	4230.00	
(ii) Unitemized	110.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ➤	4340.00	26715.00
(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) ➤	4340.00	26715.00
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))	4340.00	26715.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4340.00	26715.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	221.57	1508.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ➤	221.57	1508.44
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	11500.00
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	50.00
(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	50.00
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)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Levin Share		
(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))	221.57	13058.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	221.57	13058.44

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2008)

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)	4340.00	26715.00
34. Total Contribution Refunds (from Line 28(d))	0.00	50.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4340.00	26665.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	221.57	1509.44
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	221.57	1509.44

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6/32
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Anesthesia Service Medical Group Cond Gov't Fund - Federal

A.
Full Name (Last, First, Middle Initial)
Dr. John Amole
Mailing Address 4871 Rancho Viejo Drive
City: Del Mar | State: CA | Zip Code: 92014
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13370
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B.
Full Name (Last, First, Middle Initial)
Dr. Frank Sarack
Mailing Address 12514 Rue Cheaumont
City: San Diego | State: CA | Zip Code: 92131
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13371
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C.
Full Name (Last, First, Middle Initial)
Dr. Marvin Benson
Mailing Address 13890 Crest Way
City: Del Mar | State: CA | Zip Code: 92014
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 660.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13331
Amount of Each Receipt this Period: 110.00
Payroll Deduction ($55 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 210.00

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: PAGE 7 / 32
(check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A. Full Name (Last, First, Middle Initial)
Dr. Kile Spencer
Mailing Address 471 Carolina Road
City: Del Mar State: CA Zip Code: 92014
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M D D Y Y Y Y
Transaction ID: 11(a)(i)13392
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B. Full Name (Last, First, Middle Initial)
Dr. G. Powden Bridges
Mailing Address 1838 Altamira Place
City: San Diego State: CA Zip Code: 92109
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M D D Y Y Y Y
Transaction ID: 11(a)(i)13372
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C. Full Name (Last, First, Middle Initial)
Dr. Robert Bruker
Mailing Address 9539 Genesee Ave. No. 425
City: San Diego State: CA Zip Code: 92121
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: M M D D Y Y Y Y
Transaction ID: 11(a)(i)13333
Amount of Each Receipt this Period: 100.00
Payroll Deduction ($50 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 200.00

TOTAL 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: PAGE 6 / 32
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X 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A. Full Name (Last, First, Middle Initial)
Dr. James Dage
Mailing Address 4105 Alameda Drive
City: San Diego State: CA Zip Code: 92103
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13334
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B. Full Name (Last, First, Middle Initial)
Dr. Michael Capozza
Mailing Address 5445 Shannon Ridge Lane
City: San Diego State: CA Zip Code: 92130
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13367
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C. Full Name (Last, First, Middle Initial)
Dr. Christopher Cary
Mailing Address 5836 Caminito Calor
City: San Diego State: CA Zip Code: 92131
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13335
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 150.00

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

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NAME OF COMMITTEE (in Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A.
Full Name (Last, First, Middle Initial)
Dr. Carol Callan
Mailing Address 5301 Marlborough Drive
City: San Diego State: CA Zip Code: 92116
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13373
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B.
Full Name (Last, First, Middle Initial)
Dr. Paul Corey
Mailing Address 13550 Nogales Drive
City: Del Mar State: CA Zip Code: 92014
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13403
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C.
Full Name (Last, First, Middle Initial)
Dr. David W. Dockweiler
Mailing Address 3650 Copper Crest Road
City: Olivenhain State: CA Zip Code: 92024
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13394
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 150.00

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

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A. Full Name (Last, First, Middle Initial)
Dr. Thomas Farrel
Mailing Address 13911 Nob Ave.
City: Del Mar | State: CA | Zip Code: 92014
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13337
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B. Full Name (Last, First, Middle Initial)
Dr. Brock Fisher
Mailing Address 2423 Marlborise Way
City: San Diego | State: CA | Zip Code: 92103
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13338
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($30 Monthly)

C. Full Name (Last, First, Middle Initial)
Dr. Michael Flynn
Mailing Address 4788 Sun Valley Road
City: Del Mar | State: CA | Zip Code: 92014
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13339
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 160.00

TOTAL This Period (last page this line number only) ▶

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A. Full Name (Last, First, Middle Initial)
Dr. Bradley Fritz
Mailing Address 12385 Sycamore Ridge Court
City: San Diego State: CA Zip Code: 92131
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13340
Amount of Each Receipt this Period: 60.00
Payroll Deduction ($30 Monthly)

B. Full Name (Last, First, Middle Initial)
Dr. David R. Gampling
Mailing Address 5668 Sandoung Avenue
City: San Diego State: CA Zip Code: 92122-4132
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13404
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C. Full Name (Last, First, Middle Initial)
Dr. Margaret Gerahan
Mailing Address 751 Cabrillo Avenue
City: San Diego State: CA Zip Code: 92106
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Physician
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13411
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

SUBTOTAL of Receipts This Page (optional) 160.00

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

25038710328

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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X 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A.
Full Name (Last, First, Middle Initial)
Dr. Kathleen Gulstrom
Mailing Address 13646 Glencliff Way
City: San Diego
State: CA
Zip Code: 92130
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M D D Y Y Y Y
Transaction ID: 11(a)(i)13341
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B.
Full Name (Last, First, Middle Initial)
Dr. Gerald R. Hess
Mailing Address 250 Jacob Lane
City: Encinitas
State: CA
Zip Code: 92024
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M D D Y Y Y Y
Transaction ID: 11(a)(i)13405
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C.
Full Name (Last, First, Middle Initial)
Dr. James Halcomb
Mailing Address 14355 Harvest Crescent
City: Poway
State: CA
Zip Code: 92064
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M D D Y Y Y Y
Transaction ID: 11(a)(i)13402
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 150.00

TOTAL 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 / 32

X 11a 11b 11c 12 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A. Full Name (Last, First, Middle Initial)
Dr. Said Hashemi
Mailing Address 7684 Hillside Drive
City: La Jolla State: CA Zip Code: 92037
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13942
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B. Full Name (Last, First, Middle Initial)
Dr. P. Lance Hendricks
Mailing Address 549 Albion Street
City: San Diego State: CA Zip Code: 92106
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13390
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C. Full Name (Last, First, Middle Initial)
Dr. Claudio Herd
Mailing Address 18723 Circo Del Norte
City: Rancho Santa Fe State: CA Zip Code: 92067
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13374
Amount of Each Receipt this Period: 100.00
Payroll Deduction ($50 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 200.00

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 14 / 32

[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund – Federal

A.
Full Name (Last, First, Middle Initial)
Dr. Robert Herzka
Mailing Address P.O. Box 1018/17174 El Vuelo
City: Rancho Santa Fe State: CA Zip Code: 92067
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13343
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B.
Full Name (Last, First, Middle Initial)
Dr. David Isaac
Mailing Address 3704 Rosecroft Lane
City: San Diego State: CA Zip Code: 92108
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13362
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C.
Full Name (Last, First, Middle Initial)
Dr. Garth Huston
Mailing Address 407 Shore View Lane
City: Del Mar State: CA Zip Code: 92014
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13344
Amount of Each Receipt this Period: 100.00
Payroll Deduction ($50 Monthly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 200.00

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: PAGE 15 / 32
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X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Govt Fund - Federal

A. Full Name (Last, First, Middle Initial)
Dr. Gloria Hwang
Mailing Address 5131 1/2 Cape May Ave.
City: San Diego | State: CA | Zip Code: 92107
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13400
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B. Full Name (Last, First, Middle Initial)
Dr. Gary Isley
Mailing Address 526 A Avenue
City: Coronado | State: CA | Zip Code: 92118
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13345
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C. Full Name (Last, First, Middle Initial)
Dr. James P. Jorgensen
Mailing Address 4941 Armin Way
City: San Diego | State: CA | Zip Code: 92115
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13392
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 150.00

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: PAGE 16 / 32
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A.
Full Name (Last, First, Middle Initial): Dr. Thomas Karagiannis
Mailing Address: 11731 Shadow Valley Road
City: El Cajon | State: CA | Zip Code: 92020
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M D D Y Y Y Y
Transaction ID: 11(a)(i)13346
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B.
Full Name (Last, First, Middle Initial): Dr. Kathleen Kaya
Mailing Address: 1860 La Jolla Rancho Road
City: La Jolla | State: CA | Zip Code: 92037
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M D D Y Y Y Y
Transaction ID: 11(a)(i)13375
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C.
Full Name (Last, First, Middle Initial): Dr. Kirk L. Labowitz
Mailing Address: 5414 Balboa Avenue
City: San Diego | State: CA | Zip Code: 92122
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M D D Y Y Y Y
Transaction ID: 11(a)(i)13407
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 150.00

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: PAGE 17 / 32
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A.
Full Name (Last, First, Middle Initial)
Dr. Darryl Lee
Mailing Address 701 Midori Ct.
City: Solana Beach | State: CA | Zip Code: 92075
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13339
Amount of Each Receipt this Period: 100.00
Payroll Deduction ($50 Monthly)

B.
Full Name (Last, First, Middle Initial)
Dr. David Levine
Mailing Address 747 Avocado Place
City: Del Mar | State: CA | Zip Code: 92014
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13347
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C.
Full Name (Last, First, Middle Initial)
Dr. Jason F. Lujan
Mailing Address 4630 E. Talmadge Drive
City: San Diego | State: CA | Zip Code: 92115-1649
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13408
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 200.00

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 10 / 32

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A.
Full Name (Last, First, Middle Initial): Dr. Melissa Martin
Mailing Address: 10825 Birch Bluff Avenue
City: San Diego State: CA Zip Code: 92131
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M D D Y Y Y Y
Transaction ID: 11(a)(i)13376
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B.
Full Name (Last, First, Middle Initial): Dr. C. Craig Moldenhauer
Mailing Address: 1530 Crest Drive
City: Encinitas State: CA Zip Code: 92024
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M D D Y Y Y Y
Transaction ID: 11(a)(i)13377
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C.
Full Name (Last, First, Middle Initial): Dr. Nelson T. Nezey
Mailing Address: 8256 Station Village Lane #2406
City: San Diego State: CA Zip Code: 92108
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M D D Y Y Y Y
Transaction ID: 11(a)(i)13378
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 150.00

TOTAL This Period (last page this line number only) ▶

25038710335

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 19 / 32

X 11a 11b 11c 12 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A.
Full Name (Last, First, Middle Initial)
Dr. Roy Neff
Mailing Address 17460 Via Cuatro Caballos
City: Rancho Santa Fe | State: CA | Zip Code: 92067
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M D D Y Y Y Y
Transaction ID: 11(a)(i)13363
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B.
Full Name (Last, First, Middle Initial)
Dr. Daniel Ness
Mailing Address 1069 J Street
City: San Diego | State: CA | Zip Code: 92101
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M D D Y Y Y Y
Transaction ID: 11(a)(i)13409
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C.
Full Name (Last, First, Middle Initial)
Dr. Laura O'Donnell
Mailing Address 4306 Pescadero Avenue
City: San Diego | State: CA | Zip Code: 92107
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M D D Y Y Y Y
Transaction ID: 11(a)(i)13379
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

SUBTOTAL of Receipts This Page (optional): 150.00

TOTAL This Period (last page this line number only):

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 20 / 32
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X 11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Govt Fund - Federal

A. Full Name (Last, First, Middle Initial)
Dr. Ruben O'Donnell
Mailing Address 2728 PMB-494, Shelter Island Dr.
City: San Diego State: CA Zip Code: 92106-2731
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Aggregate Year-to-Date ▼: 240.00
Receipt For: Primary General Other (specify) ▼
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13360
Amount of Each Receipt this Period: 40.00
Payroll Deduction ($20 Monthly)

B. Full Name (Last, First, Middle Initial)
Dr. Deborah Pepe
Mailing Address 2111 Blackmore Court
City: San Diego State: CA Zip Code: 92109
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Aggregate Year-to-Date ▼: 300.00
Receipt For: Primary General Other (specify) ▼
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13380
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C. Full Name (Last, First, Middle Initial)
Dr. Jenny Parker
Mailing Address 5104 Seashell Place
City: San Diego State: CA Zip Code: 92130
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Aggregate Year-to-Date ▼: 300.00
Receipt For: Primary General Other (specify) ▼
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13381
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 140.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER (check only one) PAGE 21 / 32
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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A. Full Name (Last, First, Middle Initial)
Dr. Brian Partridge
Mailing Address 4583 Via Palabra
City: San Diego State: CA Zip Code: 92124
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13348
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B. Full Name (Last, First, Middle Initial)
Dr. Bradley Peterson
Mailing Address 3030 Children's Wy #115
City: San Diego State: CA Zip Code: 92123
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13362
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C. Full Name (Last, First, Middle Initial)
Dr. James Paim
Mailing Address 12323 Rue Cheaumont
City: San Diego State: CA Zip Code: 92131
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13363
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 150.00

TOTAL This Period (last page this line number only) ▶

25038710338

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 22/32
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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A. Full Name (Last, First, Middle Initial)
Dr. Paul J. Fongers
Mailing Address 13325 Landfair Road
City: San Diego State: CA Zip Code: 92130
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt
Transaction ID: 11(a)(i)13984
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B. Full Name (Last, First, Middle Initial)
Dr. Kim A. Penefield
Mailing Address 2154 Corte Morel
City: Carlsbad State: CA Zip Code: 92009
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt
Transaction ID: 11(a)(i)13410
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C. Full Name (Last, First, Middle Initial)
Dr. Alex Pua
Mailing Address 3825 Ruffin Road
City: San Diego State: CA Zip Code: 92123
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt
Transaction ID: 11(a)(i)13391
Amount of Each Receipt this Period: 100.00
Payroll Deduction ($50 Monthly)

SUBTOTAL of Receipts This Page (optional): 200.00

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 23 / 32
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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A.
Full Name (Last, First, Middle Initial)
Dr. Mark S. Ransom
Mailing Address 7702 Cortina Court
City: Carlsbad | State: CA | Zip Code: 92009
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13399
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B.
Full Name (Last, First, Middle Initial)
Dr. Layne Rasmussen
Mailing Address 12555 Kingsline Ave.
City: San Diego | State: CA | Zip Code: 92131
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13349
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C.
Full Name (Last, First, Middle Initial)
Dr. Peter Raudaskoski
Mailing Address 10450 Rue Riviera Verte
City: San Diego | State: CA | Zip Code: 92131
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13350
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 150.00

TOTAL 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: PAGE 24 / 32
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A. Full Name (Last, First, Middle Initial)
Dr. Blythe M. Robinson
Mailing Address 7044 Monte Vista Avenue
City: La Jolla | State: CA | Zip Code: 92037
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13395
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B. Full Name (Last, First, Middle Initial)
Dr. Stephen Rogers
Mailing Address 1340 Opal Street
City: San Diego | State: CA | Zip Code: 92109
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13351
Amount of Each Receipt this Period: 100.00
Payroll Deduction ($50 Monthly)

C. Full Name (Last, First, Middle Initial)
Dr. Jean Romero
Mailing Address 12787 Via Tercato
City: San Diego | State: CA | Zip Code: 92130
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13400
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 200.00

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: PAGE 25 / 32
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A.
Full Name (Last, First, Middle Initial): Dr. Carol Sand
Mailing Address: 555 Amphitheatre Drive
City: Del Mar | State: CA | Zip Code: 92014
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13397
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B.
Full Name (Last, First, Middle Initial): Dr. Robert Spear
Mailing Address: 1130 Flora Avenue
City: Coronado | State: CA | Zip Code: 92118
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13352
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C.
Full Name (Last, First, Middle Initial): Dr. Barbara Strauss
Mailing Address: 12052 Via Nestore
City: Del Mar | State: CA | Zip Code: 92014
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13353
Amount of Each Receipt this Period: 60.00
Payroll Deduction ($30 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 150.00

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 28 / 32
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A. Full Name (Last, First, Middle Initial)
Dr. Geoffrey Thompson
Mailing Address 2446 Avenida de la Playa
City: La Jolla State: CA Zip Code: 92037
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13354
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B. Full Name (Last, First, Middle Initial)
Dr. Theo van den Heider
Mailing Address 4720 Norma Drive
City: San Diego State: CA Zip Code: 92115
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13386
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C. Full Name (Last, First, Middle Initial)
Dr. Glenn Vanbeken
Mailing Address 1262 Rhoda Drive
City: La Jolla State: CA Zip Code: 92037
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13386
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 150.00

TOTAL 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 27 / 32

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A. Full Name (Last, First, Middle Initial)
Dr. John Walker
Mailing Address 11794 Westview Parkway #115
City: San Diego State: CA Zip Code: 92126
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13365
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B. Full Name (Last, First, Middle Initial)
Dr. Clarence Ward
Mailing Address 11212 Zorita Court
City: San Diego State: CA Zip Code: 92124
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13365
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C. Full Name (Last, First, Middle Initial)
Dr. Michael Weber
Mailing Address 3604 Garrison Avenue
City: San Diego State: CA Zip Code: 92106
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13366
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 150.00

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) [X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A.
Full Name (Last, First, Middle Initial): Dr. C. Judson Westover
Mailing Address: 442 8th Street
City: Del Mar | State: CA | Zip Code: 92014
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M D D Y Y Y Y
Transaction ID: 11(a)(i)13387
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B.
Full Name (Last, First, Middle Initial): Dr. Curtis B. Winters
Mailing Address: 10251 Rue Saint Jacques
City: San Diego | State: CA | Zip Code: 92131
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M D D Y Y Y Y
Transaction ID: 11(a)(i)13386
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C.
Full Name (Last, First, Middle Initial): Dr. Robert Wong
Mailing Address: 345 13th Street
City: Del Mar | State: CA | Zip Code: 92014
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M D D Y Y Y Y
Transaction ID: 11(a)(i)13389
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

SUBTOTAL of Receipts This Page (optional): 150.00

TOTAL This Period (last page this line number only):

25038710345

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 32
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A. Full Name (Last, First, Middle Initial)
Dr. Glenn Wadsworth
Mailing Address 9849 Rue Biarritz
City: San Diego State: CA Zip Code: 92131
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13357
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B. Full Name (Last, First, Middle Initial)
Dr. H. Michael Worthen
Mailing Address 4637 Vista Dela Tierra
City: Del Mar State: CA Zip Code: 92014
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13369
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C. Full Name (Last, First, Middle Initial)
Dr. John Wright
Mailing Address 3083 Cranbrook Court
City: La Jolla State: CA Zip Code: 92037
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13358
Amount of Each Receipt this Period: 100.00
Payroll Deduction ($50 Monthly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 200.00

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 30 / 32
[X] 11a [ ] 11b [ ] 11c [ ] 12
13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A. Full Name (Last, First, Middle Initial)
Dr. Stuart A. Young
Mailing Address 655 Zurn Drive
City: Del Mar | State: CA | Zip Code: 92014
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13359
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

B. Full Name (Last, First, Middle Initial)
Dr. Gary Zimmet
Mailing Address 4274 Arguello St.
City: San Diego | State: CA | Zip Code: 92103
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13359
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

C. Full Name (Last, First, Middle Initial)
Dr. Roger Zemon
Mailing Address 3545 Front St
City: San Diego | State: CA | Zip Code: 92103
FEC ID number of contributing federal political committee: C
Name of Employer: ASMG
Occupation: Anesthesiologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: 11(a)(i)13360
Amount of Each Receipt this Period: 50.00
Payroll Deduction ($25 Monthly)

SUBTOTAL of Receipts This Page (optional) 150.00

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: PAGE 31/32
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

Full Name (Last, First, Middle Initial)
A. Dr. Andrew Zimmerman

Mailing Address 9703 Clairborne Square

City: La Jolla
State: CA
Zip Code: 92037

FEC ID number of contributing federal political committee: C

Name of Employer: ASMG
Occupation: Anesthesiologist

Receipt For:
Primary General
Other (specify)

Aggregate Year-to-Date: 300.00

Date of Receipt: M M D D Y Y Y Y

Transaction ID: 11(a)0113996

Amount of Funds Received this Period: 50.00

Payroll Deduction ($25 Monthly)

SUBTOTAL of Receipts This Page (optional) 50.00

TOTAL This Period (last page this line number only) 4230.00

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

PAGE 32 / 32

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Gov't Fund - Federal

A. Full Name (Last, First, Middle Initial)
C. April Ms. Boling, CPA

Mailing Address 7185 Navajo Road Suite L

City: San Diego | State: CA | Zip Code: 92119

Purpose of Disbursement: Accounting
Candidate Name:

Category/Type: 001

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Transaction ID: B21(b)428
Date of Disbursement: 12 / 20 / 2004
Amount of Each Disbursement this Period: 108.00

B. Full Name (Last, First, Middle Initial)
C. April Ms. Boling, CPA

Mailing Address 7185 Navajo Road Suite L

City: San Diego | State: CA | Zip Code: 92119

Purpose of Disbursement: Accounting
Candidate Name:

Category/Type: 001

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Transaction ID: B21(b)427
Date of Disbursement: 12 / 04 / 2004
Amount of Each Disbursement this Period: 113.57

SUBTOTAL of Disbursements This Page (optional) ▶ 221.57

TOTAL This Period (last page this line number only) ▶ 221.57

25038710349

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The FEC added this page to the end of this filing to indicate how it was received.

Date of Receipt

☐ Hand Delivered

Postmarked

☐ USPS First Class Mail

Postmarked (R/C)

☑ USPS Registered/Certified 1-31-05

Postmarked

☐ USPS Priority Mail

Delivery Confirmation ™ Label ☐

Postmarked

☐ USPS Express Mail

☐ Postmark Illegible

☐ No Postmark

Shipping Date

☐ Overnight Delivery Service (Specify):

Date of Receipt

☐ Received from House Records & Registration Office

Date of Receipt

☐ Received from Senate Public Records Office

Date of Receipt

☐ Received from Electronic Filing Office

Date of Receipt or Postmarked

☐ Other (Specify):

PREPARER

1-31-05
DATE PREPARED

(5/2004)