

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 AmSurg Corp. Good Government Fund

ADDRESS (number and street) 20 Burton Hills Blvd. Suite 500 Nashville TN 37215 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00484410 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

5. Covering Period 01 / 01 / 2014 through 03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Thomas M. Sloan Jr.

Signature of Treasurer Thomas M. Sloan Jr. [Electronically Filed] Date 04 / 10 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

AmSurg Corp. Good Government Fund

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="7150.01"/>	<input type="text" value="7150.01"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="7150.01"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="20600.00"/>	<input type="text" value="20600.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="27750.01"/>	<input type="text" value="27750.01"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="13500.00"/>	<input type="text" value="13500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="14250.01"/>	<input type="text" value="14250.01"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

AmSurg Corp. Good Government Fund

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	20500.00	20500.00
(ii) Unitemized	100.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	20600.00	20600.00
(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)	20600.00	20600.00
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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	20600.00	20600.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	20600.00	20600.00

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13500.00	13500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	13500.00	13500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13500.00	13500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	20600.00	20600.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20600.00	20600.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 13
(check only one)
 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)
AmSurg Corp. Good Government Fund

A. Frank Blair
 Full Name (Last, First, Middle Initial)
 Mailing Address 117 Clydelan Court
 City Nashville State TN Zip Code 37205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AmSurg Occupation Regional Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 24 / 2014
Transaction ID : SA11AI.4696
 Amount of Each Receipt this Period 250.00
 Contribution

B. Daniel Buehler
 Full Name (Last, First, Middle Initial)
 Mailing Address 1427 Plymouth Drive
 City Brentwood State TN Zip Code 37027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AmSurg Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 24 / 2014
Transaction ID : SA11AI.4703
 Amount of Each Receipt this Period 1000.00
 Contribution

C. Clint Cromwell
 Full Name (Last, First, Middle Initial)
 Mailing Address 2610 Woodlawn Drive
 City Nashville State TN Zip Code 37212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AmSurg Occupation Vice President of Legal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 14 / 2014
Transaction ID : SA11AI.4686
 Amount of Each Receipt this Period 1000.00
 Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00
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 OF 13
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AmSurg Corp. Good Government Fund

Full Name (Last, First, Middle Initial) A. James De Ciutiis		Date of Receipt MM / DD / YYYY 03 / 17 / 2014 Transaction ID : SA11AI.4699
Mailing Address 35684 Poplar Crest Rd.		Amount of Each Receipt this Period 2500.00
City Wildomar	State CA	Zip Code 92595
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer AmSurg	Occupation Division Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Susan Ellis		Date of Receipt MM / DD / YYYY 03 / 17 / 2014 Transaction ID : SA11AI.4699
Mailing Address 320 Old Hickory Blvd, Apt 2202		Amount of Each Receipt this Period 500.00
City Nashville	State TN	Zip Code 37221
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer AmSurg	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Todd Hamilton		Date of Receipt MM / DD / YYYY 03 / 25 / 2014 Transaction ID : SA11AI.4700
Mailing Address 5100 Meadowlake Road		Amount of Each Receipt this Period 500.00
City Brentwood	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer AmSurg	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	3500.00
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 8 OF 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AmSurg Corp. Good Government Fund

A. Henry Herr
 Full Name (Last, First, Middle Initial)
 Mailing Address 2490 Clifftops Avenue
 City State Zip Code
 Monteagle TN 37356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AmSurg Board Member
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2014
Transaction ID : SA11AI.4676
 Amount of Each Receipt this Period
 5000.00
 Contribution

B. Kari Lindsey
 Full Name (Last, First, Middle Initial)
 Mailing Address 605 Bloomfield Way
 City State Zip Code
 Brentwood TN 37027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AmSurg Division President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2014
Transaction ID : SA11AI.4689
 Amount of Each Receipt this Period
 750.00
 Contribution

C. David Manning
 Full Name (Last, First, Middle Initial)
 Mailing Address 5001 Hill Place Drive
 City State Zip Code
 Nashville TN 37205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AmSurg Executive Vice President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2014
Transaction ID : SA11AI.4693
 Amount of Each Receipt this Period
 3000.00
 Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 8750.00
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 9 OF 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AmSurg Corp. Good Government Fund

Full Name (Last, First, Middle Initial)
A. Stephen Marshall

Mailing Address 6580 Sunnyside Court

City State Zip Code
Brentwood TN 37027

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

Name of Employer Occupation
AmSurg Division President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2014
Transaction ID : SA11AI.4685

Amount of Each Receipt this Period
1250.00

Contribution

Full Name (Last, First, Middle Initial)
B. Deb Miller

Mailing Address 1160 N Lisbon Avenue

City State Zip Code
Chandler AZ 85226

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

Name of Employer Occupation
AmSurg Regional Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2014
Transaction ID : SA11AI.4697

Amount of Each Receipt this Period
1000.00

Contribution

Full Name (Last, First, Middle Initial)
C. Erin Morris

Mailing Address 143 Ridgebend Drive

City State Zip Code
Murfreesboro TN 37128

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

Name of Employer Occupation
AmSurg Vice President, Tax

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2014
Transaction ID : SA11AI.4691

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 2750.00

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 10 OF 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AmSurg Corp. Good Government Fund

Full Name (Last, First, Middle Initial)
A. Eric Moss

Mailing Address 1031 Glastonbury Drive

City State Zip Code
 Franklin TN 37069

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

Name of Employer Occupation
 AmSurg AVP Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2014
Transaction ID : SA11AI.4692

Amount of Each Receipt this Period
 1000.00

Contribution

Full Name (Last, First, Middle Initial)
B. Ralph Napoli

Mailing Address 663 Cobh Road

City State Zip Code
 Riverdale NJ 07675

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

Name of Employer Occupation
 New Jersey Foot and Ankle Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 22 / 2014
Transaction ID : SA11AI.4674

Amount of Each Receipt this Period
 500.00

Contribution

Full Name (Last, First, Middle Initial)
C. Rich Palumbo

Mailing Address 118 Rosemary Ave.

City State Zip Code
 Amber PA 19002

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

Name of Employer Occupation
 AmSurg Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2014
Transaction ID : SA11AI.4702

Amount of Each Receipt this Period
 500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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 11 OF 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AmSurg Corp. Good Government Fund

A. Todd Shepherd
 Full Name (Last, First, Middle Initial)
 Mailing Address 362 E. Devon Drive
 City State Zip Code
 Gilbert AZ 85296
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AmSurg Division Vice President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2014
Transaction ID : SA11AI.4684
 Amount of Each Receipt this Period
 500.00
 Contribution

B. Michele Toungette
 Full Name (Last, First, Middle Initial)
 Mailing Address 6109 Bresslyn Road
 City State Zip Code
 Nashville TN 37205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AmSurg Regional Vice President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2014
Transaction ID : SA11AI.4694
 Amount of Each Receipt this Period
 250.00
 Contribution

C. Katherine S. Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1322 Trenton Ln
 City State Zip Code
 Franklin TN 37067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AmSurg Vice President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2014
Transaction ID : SA11AI.4687
 Amount of Each Receipt this Period
 500.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	20500.00

**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)

<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

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NAME OF COMMITTEE (In Full)
AmSurg Corp. Good Government Fund

Full Name (Last, First, Middle Initial)

A. ALEXANDER FOR SENATE 2014 INC

Mailing Address 228 S WASHINGTON STREET SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
Contribution

Candidate Name
LAMAR ALEXANDER

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: TN District: 00

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2014

Transaction ID : SB23.4707

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. ALEXANDER FOR SENATE 2014 INC

Mailing Address 228 S WASHINGTON STREET SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
Contribution

Candidate Name
LAMAR ALEXANDER

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: TN District: 00

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2014

Transaction ID : SB23.4708

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF PATRICK MURPHY

Mailing Address 4521 PGA BLVD. #412

City PALM BEACH GARDENS State FL Zip Code 33418

Purpose of Disbursement
Contribution

Candidate Name
PATRICK MURPHY

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: FL District: 18

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2014

Transaction ID : SB23.4681

Amount of Each Disbursement this Period

1000.00

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

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

6000.00

**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)

<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

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NAME OF COMMITTEE (In Full)
AmSurg Corp. Good Government Fund

Full Name (Last, First, Middle Initial)

A. MARSHA BLACKBURN FOR CONGRESS INC.

Mailing Address PO Box 682185

City Franklin State TN Zip Code 37068

Purpose of Disbursement

Candidate Name

Marsha Blackburn

Office Sought: House
 Senate
 President

State: TN District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	7		2	0	1	4

Transaction ID : SB23.4679

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

B. MARSHA BLACKBURN FOR CONGRESS INC.

Mailing Address PO Box 682185

City Franklin State TN Zip Code 37068

Purpose of Disbursement
Contribution

Candidate Name

Marsha Blackburn

Office Sought: House
 Senate
 President

State: TN District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	7		2	0	1	4

Transaction ID : SB23.4680

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. VERN BUCHANAN FOR CONGRESS

Mailing Address P. O. BOX 48928

City SARASOTA State FL Zip Code 34230

Purpose of Disbursement
Contribution

Candidate Name

VERNON BUCHANAN

Office Sought: House
 Senate
 President

State: FL District: 13

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	1	4

Transaction ID : SB23.4706

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

7	5	0	0	0	0	0	0	0	0
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1	3	5	0	0	0	0	0	0	0
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