

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.

Check if different than previously reported. (ACC) Suite 500

Nashville TN 37215

2. **FEC IDENTIFICATION NUMBER ▼** C C00484410 **CITY ▲** **STATE ▲** **ZIP CODE ▲**

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day **PRE-Election** Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on M M M / D D D / Y Y Y Y Y Y in the State of

- (d) 30-Day **POST-Election** Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 04 / 01 / 2012 through M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2012

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 M M M / D D D / Y Y Y Y Y Y 07 / 15 / 2012

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**

FEC Form 3X (Rev. 02/2003)

Page 2

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="2012"/>	<input type="text" value="12170.00"/>	<input type="text" value="12170.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="29220.01"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="9715.00"/>	<input type="text" value="40265.01"/>
(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="38935.01"/>	<input type="text" value="52435.01"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="25000.00"/>	<input type="text" value="38500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="13935.01"/>	<input type="text" value="13935.01"/>
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).....	9415.00	39565.01
(ii) Unitemized	300.00	700.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	9715.00	40265.01
(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)	9715.00	40265.01
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))..... ▶	9715.00	40265.01
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	9715.00	40265.01

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	25000.00	36000.00
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	2500.00
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)) ..	25000.00	38500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25000.00	38500.00

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)	9715.00	40265.01
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9715.00	40265.01
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. Mike Barnett
 Full Name (Last, First, Middle Initial)
 Mailing Address 408 Tinnan Ave
 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
 04 / 05 / 2012
Transaction ID : SA11AI.4458
 Amount of Each Receipt this Period
 500.00

B. Steve Blom
 Full Name (Last, First, Middle Initial)
 Mailing Address 22111 Impala Peak
 City State Zip Code
 San Antonio TX 78259
 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
 04 / 02 / 2012
Transaction ID : SA11AI.4453
 Amount of Each Receipt this Period
 250.00

C. Michael Bone
 Full Name (Last, First, Middle Initial)
 Mailing Address 112 Taggart Avenue
 City State Zip Code
 Nashville TN 37205
 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 ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2012
Transaction ID : SA11AI.4463
 Amount of Each Receipt this Period
 750.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
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)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Kevin Eastridge
 Full Name (Last, First, Middle Initial)
 Mailing Address 1511 Kimberleigh Court
 City State Zip Code
 Franklin TN 37069
 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 ▼
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2012
Transaction ID : SA11AI.4489
 Amount of Each Receipt this Period
 2000.00

B. Kory Harvey
 Full Name (Last, First, Middle Initial)
 Mailing Address 459 Beechwood Circle
 City State Zip Code
 Burns TN 37029
 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 ▼
 800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 19 / 2012
Transaction ID : SA11AI.4466
 Amount of Each Receipt this Period
 800.00

C. Todd Lunsford
 Full Name (Last, First, Middle Initial)
 Mailing Address 1412 Mentelle Drive
 City State Zip Code
 Franklin TN 37069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AmSurg VP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2012
Transaction ID : SA11AI.4451
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3300.00
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. Trent Mattison
 Full Name (Last, First, Middle Initial)
 Mailing Address 1203 Sir Malory Lane
 City State Zip Code
 Castle Hills TX 75056
 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 ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2012
Transaction ID : SA11AI.4469
 Amount of Each Receipt this Period
 500.00

B. Rob McCullough
 Full Name (Last, First, Middle Initial)
 Mailing Address 1003 Natchez Road
 City State Zip Code
 Franklin TN 37069
 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 ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2012
Transaction ID : SA11AI.4459
 Amount of Each Receipt this Period
 250.00

C. Debby McMillin
 Full Name (Last, First, Middle Initial)
 Mailing Address 2405 Sunset Place
 City State Zip Code
 Nashville TN 37212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AmSurg DVP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : SA11AI.4470
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
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. Don Myers

Mailing Address 3649 Brookwood Road

City Birmingham State AL Zip Code 35223

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

Name of Employer AmSurg Occupation RVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2012

Transaction ID : SA11AI.4452

Amount of Each Receipt this Period
 500.00

Full Name (Last, First, Middle Initial)
B. Omelio Rodriguez

Mailing Address 1111 Milan Avenue

City Coral Gables State FL Zip Code 33134

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

Name of Employer AmSurg Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2012

Transaction ID : SA11AI.4490

Amount of Each Receipt this Period
 1000.00

Full Name (Last, First, Middle Initial)
C. Warren Savitz

Mailing Address PO Box 773

City Brentwood State TN Zip Code 37027

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 ▼
 515.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2012

Transaction ID : SA11AI.4448

Amount of Each Receipt this Period
 515.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2015.00

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 OF 13
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Harold Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 801 Alder Court
 City Nashville State TN Zip Code 37220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AmSurg Occupation Division President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2012
Transaction ID : SA11AI.4486
 Amount of Each Receipt this Period
 750.00

B. Chad Veal
 Full Name (Last, First, Middle Initial)
 Mailing Address 5109 Regent Drive
 City Nashville State TN Zip Code 37220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AmSurg Occupation RVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2012
Transaction ID : SA11AI.4457
 Amount of Each Receipt this Period
 250.00

C. Wendel M. Wainner
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 Abercain Dr.
 City Franklin State TN Zip Code 37064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AmSurg Occupation Division VP Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2012
Transaction ID : SA11AI.4468
 Amount of Each Receipt this Period
 350.00

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	9415.00

**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. AMBULATORY SURGERY CENTER ASSOCIATION PAC (ASCAPAC)

Mailing Address 1012 CAMERON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
Contribution

Candidate Name
AMBULATORY SURGERY CENTER ASSOCIATION PAC (ASCAPAC)

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

Date of Disbursement

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

Transaction ID : SB23.4479

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. BLUMENTHAL FOR SENATE

Mailing Address C/O CACACE TUSCH & SANTAGATA
777 SUMMER ST SUITE 103

City STAMFORD State CT Zip Code 06901

Purpose of Disbursement
Contribution

Candidate Name
RICHARD BLUMENTHAL

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: CT District: 00

Date of Disbursement

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

Transaction ID : SB23.4471

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

C. DEVIN NUNES CAMPAIGN COMMITTEE

Mailing Address PO BOX 6545

City VISALIA State CA Zip Code 93290

Purpose of Disbursement
Contribution

Candidate Name
DEVIN GERALD NUNES

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: CA District: 22

Date of Disbursement

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

Transaction ID : SB23.4473

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

1	0	0	0	0	0	0	0	0	0
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5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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. JOHN SULLIVAN FOR CONGRESS, INC

Mailing Address POST OFFICE BOX 470840

City TULSA State OK Zip Code 74147

Purpose of Disbursement
Contribution

Candidate Name
JOHN SULLIVAN

Office Sought: House
 Senate
 President
State: OK District: 01

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 15 / 2012

Transaction ID : **SB23.4496**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. MICHAEL BURGESS FOR CONGRESS

Mailing Address PO BOX 2334

City DENTON State TX Zip Code 76202

Purpose of Disbursement
Contribution

Candidate Name
MICHAEL C. DR. BURGESS

Office Sought: House
 Senate
 President
State: TX District: 26

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 27 / 2012

Transaction ID : **SB23.4481**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 02 / 2012

Transaction ID : **SB23.4491**

Amount of Each Disbursement this Period

5000.00

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

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

10000.00

**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. SCHWEIKERT FOR CONGRESS

Mailing Address 8776 E SHEA BLVD, SUITE B3A-626

City State Zip Code
SCOTTSDALE AZ 85260

Purpose of Disbursement
Contribution

Candidate Name
DAVID SCHWEIKERT

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: AZ District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2012

Transaction ID : SB23.4500

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. STEVE FINCHER FOR CONGRESS

Mailing Address PO BOX 11153

City State Zip Code
JACKSON TN 38308

Purpose of Disbursement
Contribution

Candidate Name
STEVE FINCHER

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: TN District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	18	/	2012

Transaction ID : SB23.4493

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

5000.00

25000.00
