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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

Anesthesia Service Medical Group Good Gov't Fund - Federal

ADDRESS (number and street) ▼ 7165 Navajo Road, Suite L

☐ Check if different than previously reported. (ACC)

San Diego — CA — 92119

CITY ▲ STATE ▲ ZIPCODE ▲

2. FEC IDENTIFICATION NUMBER ▼ C00216184

3. IS THIS REPORT [X] NEW (N) OR [ ] AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

- [ ] Feb 20 (M2)
- [ ] Mar 20 (M3)
- [ ] Apr 20 (M4)
- [ ] May 20 (M5)
- [ ] Jun 20 (M6)
- [ ] Jul 20 (M7)
- [ ] Aug 20 (M8)
- [ ] Sep 20 (M9)
- [ ] Oct 20 (M10)
- [ ] Nov 20 (M11) (Non-Election Year Only)
- [ ] Dec 20 (M12) (Non-Election Year Only)
- [ ] Jan 31 (M13)

(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 04 01 2002 through 06 30 2002

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 Boling, CPA

Signature of Treasurer: C. April Boling — Date 07 16 2002

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
(Revised 1/2001)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Revised 1/2001)

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

Report Covering the Period: From: 04 01 2002 To: 06 30 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2002		10698.52
(b) Cash on Hand at Begining of Reporting Period	10081.12	
(c) Total Receipts (from Line 19)	2485.00	2485.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	12566.12	13183.52
7. Total Disbursements (from Line 30)	9353.17	9970.57
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3212.95	3212.95
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	

CA

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 800-420-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
OF RECEIPTS

FEC Form 3X (Revised 1/2001)

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

Report Covering the Period: From: 04 01 2002 To: 06 30 2002

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)	0.00	
(ii) Unitemized	2485.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	2485.00	2485.00
(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 32, page 4) ▶	2485.00	2485.00
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 36, page 4)	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 Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ▶	2485.00	2485.00
20. Total Federal Receipts (subtract Line 18 from Line 19) ▶	2485.00	2485.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/2001)

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	353.17	970.57
(b) Other Federal Operating Expenditures	353.17	970.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees	9000.00	9000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
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	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. Total Disbursements (add Lines 21(c), 22, 23,24,25,26,27,28(d),and 29) ▶	9353.17	9970.57
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	9353.17	9970.57

III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3)	2485.00	2485.00
33. Total Contribution Refunds (from Line 28(d))	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	2485.00	2485.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	353.17	970.57
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	353.17	970.57

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

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 Good Gov't Fund - Federal

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

Date of Disbursement: 06 / 25 / 2002

Amount of Each Disbursement this Period: 108.00

Transaction ID: B21(b)309

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

Date of Disbursement: 05 / 24 / 2002

Amount of Each Disbursement this Period: 216.00

Transaction ID: B21(b)301

C.
Full Name (Last, First, Middle Initial)
Unitemized other federal operating expenses This Period:
04/01/2002 - 06/30/2002

Mailing Address

City
State
Zip Code

Purpose of Disbursement
Unitemized expenses
Candidate Name

Category/Type: 001

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement

Amount of Each Disbursement this Period: 29.17

Transaction ID: B21(b)06/30/2002

SUBTOTAL of Disbursements This Page (optional) ▶ 353.17

TOTAL This Period (last page this line number only) ▶ 353.17

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

PAGE 6/7

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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): Bob Filner for Congress
Mailing Address: P.O. Box 127868
City: San Diego State: CA Zip Code: 92112
Purpose of Disbursement: Political Contribution
Candidate Name: Bob Filner
Category/Type: 011
Office Sought: X House / Senate / President
Disbursement For: Primary / X General / Other (specify)
State: CA District: 51
Date of Disbursement: 06 11 2002
Amount of Each Disbursement this Period: 1000.00
Transaction ID: B23308

B. Full Name (Last, First, Middle Initial): The University Club
Mailing Address: 750 B Street, Suite 3400
City: San Diego State: CA Zip Code: 92101
Purpose of Disbursement: Fundraising event 4/13/02 (In-Kind)
Candidate Name: Greg Ganske
Category/Type: 011
Office Sought: House / X Senate / President
Disbursement For: X Primary / General / Other (specify)
State: IA District:
Date of Disbursement: 06 11 2002
Amount of Each Disbursement this Period: 1746.11
Transaction ID: B23306

C. Full Name (Last, First, Middle Initial): Ganske for Senate
Mailing Address: 520 E Locust Street, 2nd Floor
City: Des Moines State: IA Zip Code: 50309
Purpose of Disbursement: Political Contribution
Candidate Name: Greg Ganske
Category/Type: 011
Office Sought: House / X Senate / President
Disbursement For: Primary / X General / Other (specify)
State: IA District:
Date of Disbursement: 06 11 2002
Amount of Each Disbursement this Period: 5000.00
Transaction ID: B23307

SUBTOTAL of Disbursements This Page (optional) ▶ 7746.11

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[ ] 21b [ ] 22 [X] 23 [ ] 24 [ ] 25
[ ] 26 [ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29

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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)
Ganske for Senate

Mailing Address
520 E Locust Street, 2nd Floor

City: Des Moines
State: IA
Zip Code: 50309

Purpose of Disbursement
Political Contribution

Category/Type: 011

Candidate Name
Greg Ganske

Office Sought: House [ ] Senate [X] President [ ]
State: IA District:

Disbursement For: [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement
06 03 2002

Amount of Each Disbursement this Period
1253.89

Transaction ID: B23904

B.

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 1253.89

TOTAL This Period (last page this line number only) ..... ▶ 9000.00

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

☐	Hand Delivered	Date of Receipt
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PREPARER	DATE PREPARED 7-16-02

(6/2000)