FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS
For Other Than An Authorized Committee

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Office Use Only

1. NAME OF COMMITTEE (in full) — TYPE OR PRINT ▼ — Example: If typing, type over the lines. 12FE4M5

Anesthesia Service Medical Group Good Gov't Fund - Federal

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

☐ Check if different than previously reported. (ACC)

CITY ▲ San Diego — STATE ▲ CA — ZIP CODE ▲ 92119 -

2. FEC IDENTIFICATION NUMBER ▼ C C00216184

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

12030770956

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:
- ☐ 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 (YE)

(c) 12-Day PRE-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on MM / DD / YYYY in the State of

(d) 30-Day POST-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 01 / 01 / 2012 through 03 / 31 / 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 C. April Boling, CPA

Signature of Treasurer [signature] Date 04 / 06 / 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.

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SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

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: M M 01 / D D 01 / Y Y Y Y 2012 To: M M 03 / D D 31 / Y Y Y Y 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y 2012		6521.99
(b) Cash on Hand at Beginning of Reporting Period.....	6521.99	
(c) Total Receipts (from Line 19).....	5685.00	5685.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	12206.99	12206.99
7. Total Disbursements (from Line 31).....	10076.93	10076.93
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	2130.06	2130.06
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	

☐ 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

12030770957

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Anesthesia Service Medical Group Good Gov't Fund - Federal

Report Covering the Period: From: 01 / 01 / 2012 To: 03 / 31 / 2012

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	0.00
(ii) Unitemized	5685.00	5685.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	5685.00	5685.00
(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) ▶	5685.00	5685.00
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)) ▶	5685.00	5685.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	5685.00	5685.00

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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) 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	576.93	576.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	576.93	576.93
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	9500.00	9500.00
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))	10076.93	10076.93
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	10076.93	10076.93

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DETAILED SUMMARY PAGE
of Disbursements

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)	5685.00	5685.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5685.00	5685.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	576.93	576.93
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	576.93	576.93

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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

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)
C. April Boling, CPA

Mailing Address 7185 Navajo Rd Ste P

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

Purpose of Disbursement: Accounting services

Candidate Name:

Category/Type: 001

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

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

Date of Disbursement: 02 / 13 / 2012

Transaction ID : 21B-772

Amount of Each Disbursement this Period: 283.82

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

Mailing Address

City | State | Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

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

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

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

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

Mailing Address

City | State | Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

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

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

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶ 283.82

TOTAL This Period (last page this line number only) ▶ 283.82

12030770961

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 ☐ 30b

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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)
National Republican Congressional Committee

Mailing Address 320 First Street, SE

City: Washington | State: DC | Zip Code: 20003

Purpose of Disbursement: Political Contribution

Category/Type: 011

Candidate Name: National Republican Congressional Committee

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

Disbursement For: 2012 ☐ Primary ☐ General ☒ Other (specify) ▼ Calendar year

Date of Disbursement: 03 / 05 / 2012

Transaction ID : 23-776

Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Jeff Flake for Senate

Mailing Address 209 Pennsylvania Avenue, SE

City: Washington | State: DC | Zip Code: 20003

Purpose of Disbursement: Political Contribution

Category/Type: 011

Candidate Name: Jeff Flake

Office Sought: ☐ House ☒ Senate ☐ President
State: AZ District:

Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify) ▼

Date of Disbursement: 03 / 26 / 2012

Transaction ID : 23-784

Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Huffman for Congress 2012

Mailing Address PO Box 151563

City: San Rafael | State: CA | Zip Code: 94915

Purpose of Disbursement: Political Contribution

Category/Type: 011

Candidate Name: Jared Huffman

Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 06

Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify) ▼

Date of Disbursement: 03 / 26 / 2012

Transaction ID : 23-786

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 3000.00

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

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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 ☐ 30b

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

A. Full Name (Last, First, Middle Initial): Doug LaMalfa Committee
Mailing Address: 1900 Oro Dam Boulevard East, Ste 1
City: Oroville State: CA Zip Code: 95966
Purpose of Disbursement: Political Contribution
Category/Type: 011
Candidate Name: Doug LaMalfa
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 01
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 26 / 2012
Transaction ID : 23-788
Amount of Each Disbursement this Period: 500.00

B. Full Name (Last, First, Middle Initial): Linda Lingle Senate Committee
Mailing Address: PO Box 455
City: Rancho Santa Fe State: CA Zip Code: 92067
Purpose of Disbursement: Political Contribution
Category/Type: 011
Candidate Name: Linda Lingle
Office Sought: ☐ House ☒ Senate ☐ President
State: HI District:
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 05 / 2012
Transaction ID : 23-775
Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Lungren for Congress
Mailing Address: 1029 H Street, Suite 305
City: Sacramento State: CA Zip Code: 95814
Purpose of Disbursement: Political Contribution
Category/Type: 011
Candidate Name: Dan Lungren
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 03
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 05 / 2012
Transaction ID : 23-774
Amount of Each Disbursement this Period: 500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 2000.00

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

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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 ☐ 30b

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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): Romney for President
Mailing Address: 585 Commerical Street
City: Boston State: MA Zip Code: 02109
Purpose of Disbursement: Political Contribution
Category/Type: 011
Candidate Name: Mitt Romney
Office Sought: ☐ House ☐ Senate ☒ President
State: District:
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 15 / 2012
Transaction ID : 23-781
Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Strickland for Congress 2012
Mailing Address: 515 South Figueroa Street, 16th Fl
City: Los Angeles State: CA Zip Code: 90071
Purpose of Disbursement: Political Contribution
Category/Type: 011
Candidate Name: Anthony Strickland
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 26
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 26 / 2012
Transaction ID : 23-783
Amount of Each Disbursement this Period: 2000.00

C. Full Name (Last, First, Middle Initial): Valadao for Congress
Mailing Address: 504 Van Ness Avenue
City: Fresno State: CA Zip Code: 93721
Purpose of Disbursement: Political Contribution
Category/Type: 011
Candidate Name: David Valadao
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 21
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 26 / 2012
Transaction ID : 23-787
Amount of Each Disbursement this Period: 500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 3500.00

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

12030770964

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 ☐ 30b

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

A.
Full Name (Last, First, Middle Initial): Vargas for Congress 2012
Mailing Address: 5429 Madison Avenue
City: Sacramento State: CA Zip Code: 95841
Purpose of Disbursement: Political Contribution
Category/Type: 011
Candidate Name: Juan Vargas
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 51
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 26 / 2012
Transaction ID : 23-785
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Category/Type:
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
Amount of Each Disbursement this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Category/Type:
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
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 1000.00

TOTAL This Period (last page this line number only) ▶ 9500.00

12030770965

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.

☐ Hand Delivered	Date of Receipt
☐ USPS First Class Mail	Postmarked
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☐ No Postmark	
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Next Business Day Delivery ☐	
☐ 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
☐ Other (Specify):	Date of Receipt or Postmarked
PREPARER	DATE PREPARED 4/11/12

(3/2005)

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