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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) ▼ 7185 Navajo Road, Suite P

☐ Check if different than previously reported. (ACC)

CITY ▲	STATE ▲	ZIPCODE ▲
San Diego	CA	92119

2. FEC IDENTIFICATION NUMBER ▼ C00216184

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- [X] April 15 Quarterly Report(Q1)
- [ ] 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)	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 01 01 2010 through 03 31 2010

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 _____ Date 04 10 2010

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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FEC FORM 3X (Rev. 12/2004)

FE6AN026

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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: MM 01 DD 01 YYYY 2010 To: MM 03 DD 31 YYYY 2010

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 YYYY 2010		15216.26
(b) Cash on Hand at Begining of Reporting Period	15216.26	
(c) Total Receipts (from Line 19)	0.00	0.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	15216.26	15216.26
7. Total Disbursements (from Line 31)	8848.96	8848.96
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	6367.30	6367.30
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

FE6AN026

10030284958

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: MM 01 DD 01 YYYY 2010 To: MM 03 DD 31 YYYY 2010

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	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ▶	0.00	0.00
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))	0.00	0.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	0.00

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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) Shared 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	348.96	348.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	348.96	348.96
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	8500.00	8500.00
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. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))	8848.96	8848.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	8848.96	8848.96

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DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	348.96	348.96
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	348.96	348.96

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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): Friends of Kelly Ayotte
Mailing Address: P.O. Box 7272
City: Alexandria State: VA Zip Code: 22307-0272
Purpose of Disbursement: Political Contribution
Candidate Name: Kelly Ayotte
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: NH District:
Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 23-687
Date of Disbursement: 03 / 30 / 2010
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Bob Filner for Congress
Mailing Address: PO Box 121480
City: Chula Vista State: CA Zip Code: 91912
Purpose of Disbursement: Political Contribution
Candidate Name: Bob Filner
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 51
Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 23-685
Date of Disbursement: 03 / 23 / 2010
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): Andy Harris for Congress
Mailing Address: PO Box 1527
City: Annapolis State: MD Zip Code: 21404
Purpose of Disbursement: Political Contribution
Candidate Name: Andy Harris
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MD District: 01
Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼
Transaction ID: 23-684
Date of Disbursement: 03 / 23 / 2010
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 7000.00

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): Duncan D. Hunter for Congress

Mailing Address: 9340 Fuerte Drive Suite 302

City: La Mesa | State: CA | Zip Code: 91941

Purpose of Disbursement: Political Contribution

Candidate Name: Duncan D Hunter

Category/Type: 011

Office Sought: X House / Senate / President

State: CA District: 52

Disbursement For: 2010 X Primary / General / Other (specify) ▼

Transaction ID: 23-682

Date of Disbursement: 02 / 10 / 2010

Amount of Each Disbursement this Period: 1000.00

B.

Full Name (Last, First, Middle Initial): Marco Rubio for US Senate

Mailing Address: 4031 South Le Jeune Road

City: Coral Gables | State: FL | Zip Code: 33146

Purpose of Disbursement: Political Contribution

Candidate Name: Marco Rubio

Category/Type: 011

Office Sought: House / X Senate / President

State: FL District:

Disbursement For: 2010 X Primary / General / Other (specify) ▼

Transaction ID: 23-683

Date of Disbursement: 02 / 24 / 2010

Amount of Each Disbursement this Period: 500.00

SUBTOTAL of Disbursements This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	8500.00

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Federal Election Commission
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PREPARER	4/13/10 DATE PREPARED

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