24038264984

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2004 JAN 20 A 10 39

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 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)

July 15 Quarterly Report(Q2)

October 15 Quarterly Report(Q3)

X 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 (12S)

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 07 01 2003 through 12 31 2003

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 01 10 2004

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
(Rev. 02/2003)

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: 07 01 2003 To: 12 31 2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2003		9771.65
(b) Cash on Hand at Begining of Reporting Period	5150.70	
(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)	5150.70	9771.65
7. Total Disbursements (from Line 31)	4147.11	8768.06
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1003.59	1003.59
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

DETAILED SUMMARY PAGE
OF RECEIPTS

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: 07 01 2003 To: 12 31 2003

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	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

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	2147.11	2768.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	2147.11	2768.06
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	2000.00	6000.00
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))	4147.11	8768.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	4147.11	8768.06

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))	2147.11	2768.06
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2147.11	2768.06

SCHEDULE B (FEC F3X)
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

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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

Transaction ID: B21(b)376
Date of Disbursement
12 31 2003

Mailing Address 7185 Navajo Road Suite L

City: San Diego
State: CA
Zip Code: 92119

Amount of Each Disbursement this Period
233.00

Purpose of Disbursement: Accounting
Candidate Name:
001 Category/Type

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

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

Transaction ID: B21(b)371
Date of Disbursement
08 28 2003

Mailing Address 7185 Navajo Road Suite L

City: San Diego
State: CA
Zip Code: 92119

Amount of Each Disbursement this Period
83.00

Purpose of Disbursement: Accounting
Candidate Name:
001 Category/Type

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

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

Transaction ID: B21(b)370
Date of Disbursement
07 23 2003

Mailing Address 7185 Navajo Road Suite L

City: San Diego
State: CA
Zip Code: 92119

Amount of Each Disbursement this Period
83.00

Purpose of Disbursement: Accounting
Candidate Name:
001 Category/Type

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

SUBTOTAL of Disbursements This Page (optional) ▶ 399.00

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

SCHEDULE B (FEC F3X)
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

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NAME OF COMMITTEE (In Full)
Anesthesia Service Medical Group Good Govt Fund - Federal

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

Transaction ID: B21(b)364
Date of Disbursement
11 24 2003

Mailing Address 7185 Navajo Road Suite L

City: San Diego
State: CA
Zip Code: 92119

Amount of Each Disbursement this Period
83.00

Purpose of Disbursement
November Services

Candidate Name

001
Category/Type

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

Disbursement For: Primary / General / Other (specify)

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

Transaction ID: B21(b)367
Date of Disbursement
10 31 2003

Mailing Address 7185 Navajo Road Suite L

City: San Diego
State: CA
Zip Code: 92119

Amount of Each Disbursement this Period
83.00

Purpose of Disbursement
October Services

Candidate Name

001
Category/Type

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

Disbursement For: Primary / General / Other (specify)

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

Transaction ID: B21(b)357
Date of Disbursement
09 25 2003

Mailing Address 7185 Navajo Road Suite L

City: San Diego
State: CA
Zip Code: 92119

Amount of Each Disbursement this Period
83.00

Purpose of Disbursement
September 2003

Candidate Name

001
Category/Type

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

Disbursement For: Primary / General / Other (specify)

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 249.00

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

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SCHEDULE B (FEC F3X)
ITEMIZED DISBURSEMENTS

Use seperate 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

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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)
Cook Political Report

Mailing Address 1501 M Street, NW Suite 300

City: Washington State: DC Zip Code: 20005

Purpose of Disbursement: ADMINISTRATIVE OR FINANCIAL REPORTING SE

Candidate Name

Category/Type: 001

Office Sought: House / Senate / President

State: District:

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

Transaction ID: B21(b)352
Date of Disbursement: 07 / 07 / 2003

Amount of Each Disbursement this Period: 470.00

B.
Full Name (Last, First, Middle Initial)
National Journal Magazine

Mailing Address 1501 M Street NW #300

City: Washington State: DC Zip Code: 20005

Purpose of Disbursement: Miscellaneous Exp

Candidate Name

Category/Type: 001

Office Sought: House / Senate / President

State: District:

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

Transaction ID: B21(b)365
Date of Disbursement: 08 / 26 / 2003

Amount of Each Disbursement this Period: 999.00

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

Mailing Address 7195 Navajo Road Suite L

City: San Diego State: CA Zip Code: 92119

Purpose of Disbursement: Unitemized expenses

Candidate Name

Category/Type: 001

Office Sought: House / Senate / President

State: District:

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

Transaction ID: B21(b)12/31/2003
Date of Disbursement:

Amount of Each Disbursement this Period: 30.11

SUBTOTAL of Disbursements This Page (optional) ▶ 1499.11

TOTAL This Period (last page this line number only) ▶ 2147.11

SCHEDULE B (FEC F3X)
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 [ ] 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 Melissa Brown

Mailing Address 1107 Bethlehem Pike Suite 210

City: Flourtown State: PA Zip Code: 19031

Purpose of Disbursement: Political Contribution

Candidate Name: Melissa Brown

Category/Type: 011

Office Sought: X House / Senate / President

State: PA District: 13

Disbursement For: 2004 X Primary / General / Other (specify)

Transaction ID: B23374
Date of Disbursement: 12 01 2003

Amount of Each Disbursement this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Iase for Congress

Mailing Address PO Box 28290

City: Santa Ana State: CA Zip Code: 92799

Purpose of Disbursement: Political Contribution

Candidate Name: Darrell Issa

Category/Type: 011

Office Sought: X House / Senate / President

State: CA District: 49

Disbursement For: 2004 X Primary / General / Other (specify)

Transaction ID: B23368
Date of Disbursement: 11 05 2003

Amount of Each Disbursement this Period: 1000.00

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

Mailing Address 1970 Roswell Road

City: Marietta State: GA Zip Code: 30062

Purpose of Disbursement: Political Contribution

Candidate Name: Tom Price

Category/Type: 011

Office Sought: X House / Senate / President

State: GA District: 6

Disbursement For: 2004 X Primary / General / Other (specify)

Transaction ID: B23375
Date of Disbursement: 12 01 2003

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) 2000.00

24038264993

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
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED (R/C) 1/12/04
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked and/or Date of Receipt
☐	Electronic Filing	

PREPARER

1/20/04
DATE PREPARED

(6/2000)