

LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration

1. Effective Date of Registration Oct 01, 2007

2. House Identification Number 36550

Senate Identification Number 305852-1004358

REGISTRANT

3. Registrant Name: AMERICAN CAPITOL GROUP
Address: 122 C STREET, NW SUITE 500
City: WASHINGTON State: DC Zip: 20001

4. Principal place of business (if different from line 3):

5. Telephone number and contact name:
2026283750 Contact: DAVE LARSON
E-mail(optional): dave@americancapitolgroup.com

6. General description of registrant's business or activities:
Government Realties Firm

CLIENT

A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check the box labeled "Self" and proceed to line 10.

Self

7. Client name: TEAM HEALTH
Address: 1900 WINSTON ROAD, SUITE 300
City: KNOXVILLE State: TN Zip: 37919

8. Principal place of business (if different from line 7):

9. General description of client's business or activities:
Hospital-based clinical outsourcing services provider

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person listed in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of first acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name: KETCHEL, PAUL
Covered Official Position (if applicable): N/A
Name: LARSON, DAVE
Covered Official Position (if applicable): N/A
Name: LINK, JIM
Covered Official Position (if applicable): N/A

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, page 1:

MMM

12. Specific lobbying issues (current and anticipated):

Medicare Reimbursement

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a semi-annual period **and** 13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a

Registrant Name: AMERICAN CAPITOL GROUP Client Name: TEAM HEALTH

semi-annual period in whole or in major part plans, supervises or controls the registrant's lobbying activities?

No, then go to line 14.

Yes, then complete the rest of this section for each entity matching the criteria above, then proceed to line 14.

FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes activities of the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome of the lobbying activity?

No, then sign and date the registration.

Yes, then complete the rest of this section for each entity matching the criteria above, then sign and date the registration.

Signature: ON FILE Date: Oct 10, 2007

Printed Name and Title: DAVE LARSON, PARTNER -