

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 14 OF 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Asurion LLC Political Action Committee (Asurion PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dunphy, John, R., ,

Mailing Address 31 Ashford Ct

City

Mary Esther

State

FL

Zip Code

32569

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Asurion LLC

Occupation (for Individual)

VP, Associate General Counsel

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 09 / 2019

Transaction ID : SA11AI.6499

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Elter, John, , ,

Mailing Address 7 Liberty Way

City

South Bound Brook

State

NJ

Zip Code

08880

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Asurion LLC

Occupation (for Individual)

Sr. Director, Creative Solutions

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 01 / 2019

Transaction ID : SA11AI.6467

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ezell, Kelli, , ,

Mailing Address 2224 Salem Woods Dr

City

Rockvale

State

TN

Zip Code

37153

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Asurion LLC

Occupation (for Individual)

Sr Director HRBP

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 09 / 2019

Transaction ID : SA11AI.6494

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

1500.00

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