

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

<b>The GPAC Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00068710	<b>2</b> Total pages filed: 117
<b>3</b> COMMITTEE NAME Safelite Group, Inc. PAC		<b>OFFICE USE ONLY</b>	
		Date Received ELECTRONICALLY FILED 10/28/2024	
<b>4</b> COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7400 Safelite Way  Columbus, OH 43235	Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR                      FIRST Gretchen	MI	
	NICKNAME                              LAST                                      SUFFIX Jeffries		
<b>6</b> CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE);                      APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE 7400 Safelite Way  Columbus, OH 43235		
<b>7</b> CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX;    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE 7400 Safelite Way  Columbus, OH 43235		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE                      PHONE NUMBER                      EXTENSION (614) 210-9266		
<b>9</b> REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
<b>10</b> PERIOD COVERED	Month    Day    Year 07/01/2024	THROUGH	Month    Day    Year 10/26/2024
<b>11</b> ELECTION	ELECTION DATE Month    Day    Year 11/05/2024	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

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# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Safelite Group, Inc. PAC	<b>13 Filer ID</b> (Ethics Commission Filers) 00068710
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported <b>Angie Button</b>
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 8,935.60
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 15,000.00
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 202,183.02
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

**16 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Gretchen Jeffries  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**  
ADDENDUM

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<b>12 COMMITTEE NAME</b> Safelite Group, Inc. PAC		<b>13 Filer ID</b> (Ethics Commission Filers) 00068710
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Ann Johnson  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Bryan Hughes  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Caroline Harris Davila  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**  
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<b>12 COMMITTEE NAME</b> Safelite Group, Inc. PAC		<b>13 Filer ID</b> (Ethics Commission Filers) 00068710
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported <b>Todd Hunter</b>  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported <b>Dade Phelan</b>  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported <b>Dennis Paul</b>  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**  
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<b>12 COMMITTEE NAME</b> Safelite Group, Inc. PAC		<b>13 Filer ID</b> (Ethics Commission Filers) 00068710
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Dustin Burrows  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported C. Brandon Creighton  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Tom Oliverson  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

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<b>12 COMMITTEE NAME</b> Safelite Group, Inc. PAC		<b>13 Filer ID</b> (Ethics Commission Filers) 00068710
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Giovanni Capriglione  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported John Lujan  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Jose Menendez  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

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<b>12 COMMITTEE NAME</b> Safelite Group, Inc. PAC		<b>13 Filer ID</b> (Ethics Commission Filers) 00068710
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Judith Zaffirini  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Lacey Hull  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Mary Perez  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

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<b>12 COMMITTEE NAME</b> Safelite Group, Inc. PAC		<b>13 Filer ID</b> (Ethics Commission Filers) 00068710
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Morgan Meyer  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Nathan Johnson  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Robert Nichols  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	



# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

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<b>12 COMMITTEE NAME</b> Safelite Group, Inc. PAC		<b>13 Filer ID</b> (Ethics Commission Filers) 00068710
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Tan Parker  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Charles Schwertner  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Dan Patrick  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

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<b>12 COMMITTEE NAME</b> Safelite Group, Inc. PAC	<b>13 Filer ID</b> (Ethics Commission Filers) 00068710
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Kelly Hancock
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Keith Bell
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

**SUBTOTALS - GPAC****FORM GPAC**  
**COVER SHEET PG 3**  
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<b>17 COMMITTEE NAME</b> Safelite Group, Inc. PAC		<b>18 Filer ID</b> 00068710	(Ethics Commission Filers)
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	8,935.60
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$	
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$	
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	15,000.00
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/98 Rpt: 12/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alfman, Chad <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Quality Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alfman, Chad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alfman, Chad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alfman, Chad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alfman, Chad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/98 Rpt: 13/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alfman, Chad <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Quality Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alfman, Chad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alfman, Chad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alfman, Chad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alfman, Chad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/98 Rpt: 14/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 09/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alfman, Chad <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Quality Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alfman, Chad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alfman, Chad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alfman, Chad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alfman, Chad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/98 Rpt: 15/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235		
<b>8</b> Principal occupation / Job title (See Instructions) Quality Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$)  \$96.15
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$)  \$96.15
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$)  \$96.15
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/98 Rpt: 16/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cacchillo, Renee	<b>7</b> Amount of Contribution (\$)  \$96.15
<b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235		
<b>8</b> Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cacchillo, Renee	Amount of Contribution (\$)  \$96.15
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cacchillo, Renee	Amount of Contribution (\$)  \$96.15
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cacchillo, Renee	Amount of Contribution (\$)  \$96.15
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cacchillo, Renee	Amount of Contribution (\$)  \$96.15
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/98 Rpt: 17/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cacchillo, Renee <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$96.15
<b>8</b> Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cacchillo, Renee <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$96.15
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cacchillo, Renee <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$96.15
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cacchillo, Renee <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$96.15
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cacchillo, Renee <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$96.15
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/98 Rpt: 18/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cacchillo, Renee	<b>7</b> Amount of Contribution (\$)  \$96.15
<b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235		
<b>8</b> Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cacchillo, Renee	Amount of Contribution (\$)  \$96.15
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cacchillo, Renee	Amount of Contribution (\$)  \$96.15
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cacchillo, Renee	Amount of Contribution (\$)  \$96.15
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Canova, Christian	Amount of Contribution (\$)  \$2.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/98 Rpt: 19/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Canova, Christian <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$2.00
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Canova, Christian <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Brenton <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Brenton <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Brenton <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/98 Rpt: 20/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Brenton <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Regional VP		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Brenton <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Brenton <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Brenton <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Brenton <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/98 Rpt: 21/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Brenton <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Regional VP		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Brenton <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Brenton <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Brenton <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Brenton <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/98 Rpt: 22/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Brenton <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Regional VP		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Brenton <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Brenton <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Brenton <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corbin, Trisha <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/98 Rpt: 23/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corbin, Trisha <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Corporate Counsel		<b>9</b> Employer (See Instructions) Safelite Group Inc
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corbin, Trisha <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corbin, Trisha <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corbin, Trisha <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corbin, Trisha <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/98 Rpt: 24/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corbin, Trisha <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Corporate Counsel		<b>9</b> Employer (See Instructions) Safelite Group Inc
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corbin, Trisha <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corbin, Trisha <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corbin, Trisha <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corbin, Trisha <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/98 Rpt: 25/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 09/20/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corbin, Trisha <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Corporate Counsel		<b>9</b> Employer (See Instructions) Safelite Group Inc
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corbin, Trisha <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corbin, Trisha <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corbin, Trisha <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corbin, Trisha <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/98 Rpt: 26/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corbin, Trisha	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235		
<b>8</b> Principal occupation / Job title (See Instructions) Corporate Counsel		<b>9</b> Employer (See Instructions) Safelite Group Inc
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diefenbach, Robert	Amount of Contribution (\$)  \$3.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diefenbach, Robert	Amount of Contribution (\$)  \$3.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diefenbach, Robert	Amount of Contribution (\$)  \$3.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diefenbach, Robert	Amount of Contribution (\$)  \$3.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/98 Rpt: 27/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diefenbach, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$3.50
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diefenbach, Robert <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$3.50
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diefenbach, Robert <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$3.50
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diefenbach, Robert <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$3.50
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diefenbach, Robert <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$3.50
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/98 Rpt: 28/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 09/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diefenbach, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$3.50
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diefenbach, Robert <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$3.50
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diefenbach, Robert <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$3.50
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diefenbach, Robert <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$3.50
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diefenbach, Robert <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$3.50
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/98 Rpt: 29/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diefenbach, Robert	<b>7</b> Amount of Contribution (\$)  \$3.50
<b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235		
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diefenbach, Robert	Amount of Contribution (\$)  \$3.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diefenbach, Robert	Amount of Contribution (\$)  \$3.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Donais, James	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Donais, James	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/98 Rpt: 30/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/19/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Donais, James <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebbinghaus, Brandon <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebbinghaus, Brandon <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebbinghaus, Brandon <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebbinghaus, Brandon <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/98 Rpt: 31/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebbinghaus, Brandon <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Quality Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebbinghaus, Brandon <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebbinghaus, Brandon <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebbinghaus, Brandon <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebbinghaus, Brandon <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/98 Rpt: 32/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 09/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebbinghaus, Brandon <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Quality Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebbinghaus, Brandon <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebbinghaus, Brandon <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebbinghaus, Brandon <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebbinghaus, Brandon <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/98 Rpt: 33/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebbinghaus, Brandon <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Quality Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebbinghaus, Brandon <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebbinghaus, Brandon <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellington, Brad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellington, Brad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/98 Rpt: 34/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/19/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellington, Brad <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellington, Brad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellington, Brad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellington, Brad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellington, Brad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/98 Rpt: 35/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/23/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellington, Brad <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellington, Brad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellington, Brad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellington, Brad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellington, Brad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/98 Rpt: 36/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 09/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellington, Brad <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellington, Brad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellington, Brad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellington, Brad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellington, Brad <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/98 Rpt: 37/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Cynthia <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$96.15
<b>8</b> Principal occupation / Job title (See Instructions) VP and General Counsel		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Cynthia <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$96.15
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Cynthia <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$96.15
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Cynthia <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$96.15
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Cynthia <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$96.15
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/98 Rpt: 38/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Cynthia <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$96.15
<b>8</b> Principal occupation / Job title (See Instructions) VP and General Counsel		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Cynthia <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$96.15
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Cynthia <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$96.15
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Cynthia <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$96.15
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Cynthia <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$96.15
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/98 Rpt: 39/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 09/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Cynthia <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$96.15
<b>8</b> Principal occupation / Job title (See Instructions) VP and General Counsel		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Cynthia <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$96.15
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Cynthia <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$96.15
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Cynthia <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$96.15
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Cynthia <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$96.15
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/98 Rpt: 40/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Cynthia <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$96.15
<b>8</b> Principal occupation / Job title (See Instructions) VP and General Counsel		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Cynthia <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$96.15
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henry, Robert <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) VP Client Sales & Support		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henry, Robert <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) VP Client Sales & Support		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henry, Robert <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) VP Client Sales & Support		Employer (See Instructions) Safelite Autoglass, Inc.



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/98 Rpt: 41/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Glenn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$2.00
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Glenn <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Glenn <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Glenn <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Glenn <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/98 Rpt: 42/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Glenn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$2.00
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Glenn <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Glenn <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Glenn <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Glenn <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/98 Rpt: 43/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 09/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Glenn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$2.00
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Glenn <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Glenn <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Glenn <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Glenn <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/98 Rpt: 44/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Glenn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$2.00
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Glenn <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jeffries, Gretchen <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jeffries, Gretchen <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jeffries, Gretchen <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/98 Rpt: 45/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jeffries, Gretchen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Corporate Counsel		<b>9</b> Employer (See Instructions) Safelite Group Inc
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jeffries, Gretchen <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jeffries, Gretchen <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jeffries, Gretchen <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jeffries, Gretchen <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/98 Rpt: 46/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen	<b>7</b> Amount of Contribution (\$) \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235		
<b>8</b> Principal occupation / Job title (See Instructions) Corporate Counsel		<b>9</b> Employer (See Instructions) Safelite Group Inc
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/98 Rpt: 47/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen	<b>7</b> Amount of Contribution (\$) \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235		
<b>8</b> Principal occupation / Job title (See Instructions) Corporate Counsel		<b>9</b> Employer (See Instructions) Safelite Group Inc
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurgensen, Paul	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) NAM		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 37/98 Rpt: 48/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jurgensen, Paul <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) NAM		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jurgensen, Paul <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) NAM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelley, Barbara <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelley, Barbara <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelley, Barbara <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 38/98 Rpt: 49/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelley, Barbara <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelley, Barbara <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelley, Barbara <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelley, Barbara <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelley, Barbara <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 39/98 Rpt: 50/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelley, Barbara <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelley, Barbara <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelley, Barbara <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelley, Barbara <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelley, Barbara <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 40/98 Rpt: 51/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelley, Barbara	<b>7</b> Amount of Contribution (\$) \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235		
<b>8</b> Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelley, Barbara	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelley, Barbara	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelley, Barbara	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Korber, Karl	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 41/98 Rpt: 52/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Korber, Karl <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$2.00
<b>8</b> Principal occupation / Job title (See Instructions) Store Mgr - CTU		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Korber, Karl <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Korber, Karl <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Korber, Karl <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Korber, Karl <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 42/98 Rpt: 53/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Korber, Karl <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$2.00
<b>8</b> Principal occupation / Job title (See Instructions) Store Mgr - CTU		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Korber, Karl <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Korber, Karl <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Korber, Karl <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Korber, Karl <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 43/98 Rpt: 54/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 09/20/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Korber, Karl <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$2.00
<b>8</b> Principal occupation / Job title (See Instructions) Store Mgr - CTU		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Korber, Karl <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$2.00
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 44/98 Rpt: 55/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Korber, Karl <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$2.00
<b>8</b> Principal occupation / Job title (See Instructions) Store Mgr - CTU		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lo, Reuben <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		Employer (See Instructions) Safelite Autoglass, Inc.
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 45/98 Rpt: 56/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lo, Reuben <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
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Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		Employer (See Instructions) Safelite Autoglass, Inc.
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 46/98 Rpt: 57/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 09/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lo, Reuben	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235		
<b>8</b> Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lo, Reuben	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
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Contributor address; City; State; Zip Code  Columbus, OH 43235		
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Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lo, Reuben	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 47/98 Rpt: 58/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lo, Reuben <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lo, Reuben <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$12.50
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Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Massa, Shawn <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Massa, Shawn <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 48/98 Rpt: 59/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/19/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Massa, Shawn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) ASM		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Massa, Shawn <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
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Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Massa, Shawn <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 49/98 Rpt: 60/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/23/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Massa, Shawn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$10.00
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Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 50/98 Rpt: 61/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 09/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Massa, Shawn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) ASM		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 51/98 Rpt: 62/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McAnally, Cheryl <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) ASM		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
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Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McAnally, Cheryl <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 52/98 Rpt: 63/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McAnally, Cheryl <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$25.00
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 53/98 Rpt: 64/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 54/98 Rpt: 65/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McAnally, Cheryl <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) ASM		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McAnally, Cheryl <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCafferty, Keenan <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCafferty, Keenan <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCafferty, Keenan <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 55/98 Rpt: 66/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCafferty, Keenan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCafferty, Keenan <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCafferty, Keenan <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCafferty, Keenan <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCafferty, Keenan <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 56/98 Rpt: 67/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCafferty, Keenan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCafferty, Keenan <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCafferty, Keenan <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCafferty, Keenan <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCafferty, Keenan <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 57/98 Rpt: 68/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCafferty, Keenan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCafferty, Keenan <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCafferty, Keenan <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCafferty, Keenan <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McDonald, Malcolm <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) NAM		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 58/98 Rpt: 69/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McDonald, Malcolm	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235		
<b>8</b> Principal occupation / Job title (See Instructions) NAM		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McDonald, Malcolm	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) NAM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McDonald, Malcolm	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) NAM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McDonald, Malcolm	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) NAM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McDonald, Malcolm	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) NAM		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 59/98 Rpt: 70/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGowan, Darrin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$7.50
<b>8</b> Principal occupation / Job title (See Instructions) ASM		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGowan, Darrin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGowan, Darrin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGowan, Darrin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGowan, Darrin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 60/98 Rpt: 71/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGowan, Darrin	<b>7</b> Amount of Contribution (\$)  \$7.50
<b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235		
<b>8</b> Principal occupation / Job title (See Instructions) ASM		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGowan, Darrin	Amount of Contribution (\$)  \$7.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGowan, Darrin	Amount of Contribution (\$)  \$7.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGowan, Darrin	Amount of Contribution (\$)  \$7.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGowan, Darrin	Amount of Contribution (\$)  \$7.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 61/98 Rpt: 72/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 09/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGowan, Darrin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$7.50
<b>8</b> Principal occupation / Job title (See Instructions) ASM		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGowan, Darrin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGowan, Darrin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGowan, Darrin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGowan, Darrin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 62/98 Rpt: 73/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGowan, Darrin	<b>7</b> Amount of Contribution (\$)  \$7.50
<b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235		
<b>8</b> Principal occupation / Job title (See Instructions) ASM		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGowan, Darrin	Amount of Contribution (\$)  \$7.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nickerauer, Amiee	Amount of Contribution (\$)  \$7.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nickerauer, Amiee	Amount of Contribution (\$)  \$7.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nickerauer, Amiee	Amount of Contribution (\$)  \$7.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 63/98 Rpt: 74/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nickerauer, Amiee <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$7.50
<b>8</b> Principal occupation / Job title (See Instructions) Regional VP		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nickerauer, Amiee <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nickerauer, Amiee <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nickerauer, Amiee <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nickerauer, Amiee <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 64/98 Rpt: 75/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nickerauer, Amiee <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$7.50
<b>8</b> Principal occupation / Job title (See Instructions) Regional VP		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nickerauer, Amiee <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nickerauer, Amiee <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nickerauer, Amiee <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nickerauer, Amiee <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 65/98 Rpt: 76/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nickerauer, Amiee <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$7.50
<b>8</b> Principal occupation / Job title (See Instructions) Regional VP		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nickerauer, Amiee <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nickerauer, Amiee <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nickerauer, Amiee <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OMara, Brian <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 66/98 Rpt: 77/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OMara, Brian	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235		
<b>8</b> Principal occupation / Job title (See Instructions) VP Client Serv Delivery		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OMara, Brian	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OMara, Brian	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OMara, Brian	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OMara, Brian	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 67/98 Rpt: 78/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OMara, Brian <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) VP Client Serv Delivery		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OMara, Brian <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OMara, Brian <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OMara, Brian <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OMara, Brian <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 68/98 Rpt: 79/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 09/20/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OMara, Brian <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) VP Client Serv Delivery		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OMara, Brian <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OMara, Brian <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OMara, Brian <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OMara, Brian <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 69/98 Rpt: 80/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OMara, Brian <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) VP Client Serv Delivery		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oshida, Kenichi <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oshida, Kenichi <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oshida, Kenichi <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oshida, Kenichi <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 70/98 Rpt: 81/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oshida, Kenichi <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$7.50
<b>8</b> Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oshida, Kenichi <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oshida, Kenichi <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oshida, Kenichi <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oshida, Kenichi <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 71/98 Rpt: 82/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 09/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oshida, Kenichi <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$7.50
<b>8</b> Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oshida, Kenichi <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oshida, Kenichi <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oshida, Kenichi <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oshida, Kenichi <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 72/98 Rpt: 83/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oshida, Kenichi <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$7.50
<b>8</b> Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oshida, Kenichi <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oshida, Kenichi <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Overbaugh, Donald <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Overbaugh, Donald <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 73/98 Rpt: 84/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/19/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Overbaugh, Donald <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paskvan, Kathy <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claims Management Dir		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paskvan, Kathy <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claims Management Dir		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paskvan, Kathy <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claims Management Dir		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paskvan, Kathy <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claims Management Dir		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 74/98 Rpt: 85/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paskvan, Kathy	<b>7</b> Amount of Contribution (\$)  \$7.50
<b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235		
<b>8</b> Principal occupation / Job title (See Instructions) Claims Management Dir		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paskvan, Kathy	Amount of Contribution (\$)  \$7.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) Claims Management Dir		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paskvan, Kathy	Amount of Contribution (\$)  \$7.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) Claims Management Dir		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paskvan, Kathy	Amount of Contribution (\$)  \$7.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) Claims Management Dir		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paskvan, Kathy	Amount of Contribution (\$)  \$7.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) Claims Management Dir		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 75/98 Rpt: 86/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 09/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paskvan, Kathy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$7.50
<b>8</b> Principal occupation / Job title (See Instructions) Claims Management Dir		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paskvan, Kathy <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claims Management Dir		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paskvan, Kathy <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claims Management Dir		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paskvan, Kathy <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claims Management Dir		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paskvan, Kathy <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claims Management Dir		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 76/98 Rpt: 87/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paskvan, Kathy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$7.50
<b>8</b> Principal occupation / Job title (See Instructions) Claims Management Dir		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paskvan, Kathy <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claims Management Dir		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paskvan, Kathy <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Claims Management Dir		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paul, Nathan <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paul, Nathan <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 77/98 Rpt: 88/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/19/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paul, Nathan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsdell, Eric <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.50
Principal occupation / Job title (See Instructions) NAM - Fleet		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsdell, Eric <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.50
Principal occupation / Job title (See Instructions) NAM - Fleet		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsdell, Eric <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.50
Principal occupation / Job title (See Instructions) NAM - Fleet		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsdell, Eric <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.50
Principal occupation / Job title (See Instructions) NAM - Fleet		Employer (See Instructions) Safelite Autoglass, Inc.



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 78/98 Rpt: 89/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsdell, Eric <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$5.50
<b>8</b> Principal occupation / Job title (See Instructions) NAM - Fleet		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsdell, Eric <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.50
Principal occupation / Job title (See Instructions) NAM - Fleet		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsdell, Eric <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.50
Principal occupation / Job title (See Instructions) NAM - Fleet		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsdell, Eric <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.50
Principal occupation / Job title (See Instructions) NAM - Fleet		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsdell, Eric <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.50
Principal occupation / Job title (See Instructions) NAM - Fleet		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 79/98 Rpt: 90/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 09/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsdell, Eric <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$5.50
<b>8</b> Principal occupation / Job title (See Instructions) NAM - Fleet		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsdell, Eric <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.50
Principal occupation / Job title (See Instructions) NAM - Fleet		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsdell, Eric <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.50
Principal occupation / Job title (See Instructions) NAM - Fleet		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsdell, Eric <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.50
Principal occupation / Job title (See Instructions) NAM - Fleet		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsdell, Eric <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.50
Principal occupation / Job title (See Instructions) NAM - Fleet		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 80/98 Rpt: 91/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsdell, Eric <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$5.50
<b>8</b> Principal occupation / Job title (See Instructions) NAM - Fleet		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsdell, Eric <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.50
Principal occupation / Job title (See Instructions) NAM - Fleet		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsdell, Eric <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.50
Principal occupation / Job title (See Instructions) NAM - Fleet		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Kirk <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Kirk <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 81/98 Rpt: 92/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/19/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Kirk <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Kirk <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Kirk <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Kirk <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Kirk <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 82/98 Rpt: 93/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/23/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Kirk <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Kirk <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Kirk <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Kirk <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Kirk <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 83/98 Rpt: 94/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 09/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Kirk <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Kirk <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Kirk <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$5.00
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 84/98 Rpt: 95/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roeske, Gary <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roeske, Gary <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
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Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roeske, Gary <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roeske, Gary <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 85/98 Rpt: 96/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roeske, Gary <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roeske, Gary <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
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Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roeske, Gary <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 86/98 Rpt: 97/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 09/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roeske, Gary <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$10.00
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Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roeske, Gary <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roeske, Gary <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 87/98 Rpt: 98/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roeske, Gary <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roeske, Gary <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spriet, Daniel <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spriet, Daniel <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spriet, Daniel <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 88/98 Rpt: 99/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spriet, Daniel	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235		
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spriet, Daniel	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spriet, Daniel	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spriet, Daniel	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spriet, Daniel	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 89/98 Rpt: 100/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spriet, Daniel	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235		
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spriet, Daniel	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spriet, Daniel	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spriet, Daniel	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spriet, Daniel	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 90/98 Rpt: 101/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spriet, Daniel	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235		
<b>8</b> Principal occupation / Job title (See Instructions) District Manager		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spriet, Daniel	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spriet, Daniel	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spriet, Daniel	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sprigler, Edward	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) VP Strategic Initiatives		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 91/98 Rpt: 102/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sprigler, Edward <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) VP Strategic Initiatives		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sprigler, Edward <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) VP Strategic Initiatives		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Erin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Erin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Erin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 92/98 Rpt: 103/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Erin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$7.50
<b>8</b> Principal occupation / Job title (See Instructions) People & LD Director		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Erin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Erin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Erin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Erin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 93/98 Rpt: 104/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Erin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$7.50
<b>8</b> Principal occupation / Job title (See Instructions) People & LD Director		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Erin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Erin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Erin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Erin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 94/98 Rpt: 105/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Erin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$7.50
<b>8</b> Principal occupation / Job title (See Instructions) People & LD Director		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Erin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Erin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Erin <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zajic, Scot <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) VP Legislative Affairs		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 95/98 Rpt: 106/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 07/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zajic, Scot	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235		
<b>8</b> Principal occupation / Job title (See Instructions) VP Legislative Affairs		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zajic, Scot	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) VP Legislative Affairs		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zajic, Scot	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) VP Legislative Affairs		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zajic, Scot	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) VP Legislative Affairs		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zajic, Scot	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) VP Legislative Affairs		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 96/98 Rpt: 107/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 08/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zajic, Scot <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) VP Legislative Affairs		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zajic, Scot <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) VP Legislative Affairs		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zajic, Scot <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) VP Legislative Affairs		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zajic, Scot <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) VP Legislative Affairs		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zajic, Scot <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) VP Legislative Affairs		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 97/98 Rpt: 108/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 09/20/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zajic, Scot	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235		
<b>8</b> Principal occupation / Job title (See Instructions) VP Legislative Affairs		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zajic, Scot	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) VP Legislative Affairs		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zajic, Scot	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) VP Legislative Affairs		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zajic, Scot	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) VP Legislative Affairs		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zajic, Scot	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Columbus, OH 43235		
Principal occupation / Job title (See Instructions) VP Legislative Affairs		Employer (See Instructions) Safelite Autoglass, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 98/98 Rpt: 109/117
<b>2</b> FILER NAME Safelite Group, Inc. PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zajic, Scot <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43235	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) VP Legislative Affairs		<b>9</b> Employer (See Instructions) Safelite Autoglass, Inc.

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/8 Rpt: 110/117	<b>2</b> FILER NAME Safelite Group, Inc. PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/20/2024	<b>5</b> Payee name Bell, Keith (Rep.)	
<b>6</b> Amount (\$) \$250.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1178  Forney, TX 75126	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Keith Bell/Support/2024 General
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/20/2024	Payee name Burrows, Dustin (Rep.)	
Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 2569  Lubbock, TX 79408	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dustin Burrows/Support/2024 General
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/20/2024	Payee name Button, Angie (Rep.)	
Amount (\$) \$250.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 832748  Richardson, TX 75083	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Angie Button/Support/2024 General
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/8 Rpt: 111/117	<b>2</b> FILER NAME Safelite Group, Inc. PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/20/2024	<b>5</b> Payee name Capriglione, Giovanni (Rep.)	
<b>6</b> Amount (\$) \$1,500.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 92007  Southlake, TX 76092	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Giovanni Capriglione/Support/2024 General
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/20/2024	Payee name Creighton, C. Brandon (Sen.)	
Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2257 N. Loop 336 Ste. 140-366 Conroe, TX 77304	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense C. Brandon Creighton/Support/2026 Primary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/20/2024	Payee name Hancock, Kelly (Sen.)	
Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 821349  Richland Hills, TX 76182	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kelly Hancock/Support/2026 Primary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/8 Rpt: 112/117	<b>2</b> FILER NAME Safelite Group, Inc. PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/20/2024	<b>5</b> Payee name Harris Davila, Caroline (Rep.)	
<b>6</b> Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 700  Round Rock, TX 78680	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Caroline Harris Davila/Support/2024 General
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/20/2024	Payee name Hughes, Bryan (Sen.)	
Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 450  Mineola, TX 75773	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bryan Hughes/Support/2026 Primary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/20/2024	Payee name Hull, Lacey (Rep.)	
Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 19231  Houston, TX 77224	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lacey Hull/Support/2024 General
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/8 Rpt: 113/117	<b>2</b> FILER NAME Safelite Group, Inc. PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00068710
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<b>4</b> Date 10/20/2024	<b>5</b> Payee name Hunter, Todd (Rep.)
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<b>6</b> Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 445 Cape Henry  Corpus Christi, TX 78412
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Todd Hunter/Support/2024 General
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/20/2024	Payee name Johnson, Ann (Rep.)
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Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 56386  Houston, TX 77256
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ann Johnson/Support/2024 General
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/20/2024	Payee name Johnson, Nathan (Sen.)
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Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 670994  Dallas, TX 75367
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Nathan Johnson/Support/2024 General
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/8 Rpt: 114/117	<b>2</b> FILER NAME Safelite Group, Inc. PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00068710
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<b>4</b> Date 10/20/2024	<b>5</b> Payee name Lujan, John (Rep.)
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<b>6</b> Amount (\$) \$250.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 14479  San Antonio, TX 78214
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense John Lujan/Support/2024 General
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/20/2024	Payee name Menendez, Jose (Sen.)
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Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 100833  San Antonio, TX 78201
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jose Menendez/Support/2026 Primary
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/20/2024	Payee name Meyer, Morgan (Rep.)
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Amount (\$) \$250.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3838 Oak Lawn Avenue, Suite 400  Dallas, TX 75219
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Morgan Meyer/Support/2024 General
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/8 Rpt: 115/117	<b>2</b> FILER NAME Safelite Group, Inc. PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00068710
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<b>4</b> Date 10/20/2024	<b>5</b> Payee name Nichols, Robert (Sen.)
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<b>6</b> Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code P.O. Box 2347  Jacksonville, TX 75766
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Robert Nichols/Support/2026 Primary
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/20/2024	Payee name Oliverson, Tom (Rep.)
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Amount (\$) \$1,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1 E. Greenway Plza., Ste 225  Houston, TX 77046
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tom Oliverson/Support/2024 General
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/20/2024	Payee name Parker, Tan (Sen.)
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Amount (\$) \$1,500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 271741  Flower Mound, TX 75027
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tan Parker/Support/2024 General
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/8 Rpt: 116/117	<b>2</b> FILER NAME Safelite Group, Inc. PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00068710
<b>4</b> Date 10/20/2024	<b>5</b> Payee name Patrick, Dan	
<b>6</b> Amount (\$) \$1,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 685085  Austin, TX 78768	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dan Patrick/Support/2026 Primary
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/20/2024	Payee name Paul, Dennis (Rep.)	
Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 626 1/2 Barringer Ln., Ste. E  Webster, TX 77598	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dennis Paul/Support/2024 General
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/20/2024	Payee name Perez, Mary (Rep.)	
Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6200 Gulf Fwy #125  Houston, TX 77023	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mary Perez/Support/2024 General
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/8 Rpt: 117/117	<b>2</b> FILER NAME Safelite Group, Inc. PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00068710
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<b>4</b> Date 10/20/2024	<b>5</b> Payee name Phelan, Dade (Rep.)
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<b>6</b> Amount (\$) \$1,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code P.O. Box 848  Nederland, TX 77627
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dade Phelan/Support/2024 General
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/20/2024	Payee name Schwertner, Charles (Sen.)
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Amount (\$) \$1,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 2448  Georgetown, TX 78627
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charles Schwertner/Support/2026 Primary
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/20/2024	Payee name Zaffirini, Judith (Sen.)
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Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 627  Laredo, TX 78042
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Judith Zaffirini/Support/2026 Primary
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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