### GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

# FORM GPAC COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete	this form. 1 Filer ID (Ethics Commission Filers) 00068710	2 Total pages filed: 117
3 COMMITTEE NAME	•	OFFICE USE ONLY
Safelite Group, Inc. PAC		Date Received
		10/28/2024
4 COMMITTEE ADDRESS / PO BOX; APT / SU ADDRESS 7400 Cotalita Max	ITE #; CITY; STATE; ZIP CODE	
7400 Safelite Way		Date Hand-delivered or Date Postmarked
Change of Address		
Columbus, OH 43235		Receipt # Amount
		Date Processed
		Date Imaged
5 CAMPAIGN MS/MRS/MR FIR	ST	MI
TREASURER Gre	etchen	
NAME		
NICKNAME LAS		SUFFIX
	fries	
		(; STATE; ZIP CODE
6 CAMPAIGN STREET ADDRESS (NO PO BO) TREASURER 7400 Cotolito Marc	<pre>&lt; PLEASE); APT / SUITE #; CITY</pre>	'; STATE; ZIP CODE
STREET 7400 Salelle Way		
ADDRESS		
(Residence or Business) Columbus, OH 43235		
7 CAMPAIGN STREET OR PO BOX;	APT / SUITE #; CIT	Y; STATE; ZIP CODE
TREASURER MAILING 7400 Safelite Way		
ADDRESS		
Columbus, OH 43235		
Change of Address		
8 CAMPAIGN AREA CODE PHONE N	UMBER EXTENSION	
TREASURER PHONE (614) 210-9266		
9 REPORT January 15	30th day before election	Dissolution (Attach PAC-DR)
TYPE		
July 15	X 8th day before election	10th day after campaign treasurer termination
	Runoff	
10 PERIOD Month Day Year	Month Day	Year
COVERED 07/01/2024	THROUGH 10/26/20	
01/01/2024	10/20/20	24
11 ELECTION ELECTION DATE	ELECTION TYPE	
Month Day Year		Other
11/05/2024		
	X General Special	
	GO TO PAGE 2	
Forms provided by Texas Ethics Commission	www.ethics.state.tx.us	Version V4.1.0.48da51f7

### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

## FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer	r ID (Ethics Commission Filers)
Safelite Group, Inc. PAC	2		0006	68710
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Angie Button	1	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold		\$ 0.0
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)		\$ 8,935.6
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES		\$ O.C
	4. TOTAL POLITICA	L EXPENDITURES		\$ 15,000.0
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY	\$ 202,183.0
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE	\$ 0.0
16 AFFIDAVIT	L			
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Gretche	en Jeffrie	as
		Signature of Ca		
		- -		
-	STAMP / SEAL ABOVE			
		, t	his the _	day
ot	, 20, to certify t	which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title	e of officer administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.48da51

ADDENDUM

Page 3 of 117

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

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

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

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

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

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

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

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

S	UBT	OTALS - GPAC			FORM GPAC
			C	OVE	R SHEET PG 3 11 of 117
		EE NAME roup, Inc. PAC	18 Filer ID 00068710	(Ethi	cs Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	8,935.60
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	<sup>1</sup> \$	
9.		SCHEDULE E: LOANS		\$	
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	15,000.00
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	
				•	

The Instru	uction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 1/98 Rpt: 12/117	
2 FILER NAME	 E		3	Filer ID (Ethics Commission	Filers)
	oup, Inc. PAC	1	00068710		
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
07/05/2024	Alfman, Chad				\$5.00
	6 Contributor address; City; State; Zip Code		1		
	Columbus, OH 43235				
-	cupation / Job title (See Instructions)	9 Employer (See Instructions	3)		
Quality Mar	nager	Safelite Autoglass, Inc.			
Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
07/12/2024	· · ·				\$5.00
	Contributor address; City; State; Zip Code		1		
	Columbus, OH 43235				
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions	5)		
Quality Mar	nager	Safelite Autoglass, Inc.			
Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
07/19/2024	—				\$5.00
	Contributor address; City; State; Zip Code		1		
	Columbus, OH 43235				
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions	5)		
Quality Mar	nager	Safelite Autoglass, Inc.			
Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
07/26/2024	Alfman, Chad				\$5.00
	Contributor address; City; State; Zip Code		1		
	Columbus, OH 43235				
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions	3)		
Quality Mar	nager	Safelite Autoglass, Inc.			
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Γ	Amount of Contribution (\$)	
08/02/2024	Alfman, Chad				\$5.00
	Contributor address; City; State; Zip Code		1		
	Columbus, OH 43235				
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions	<u>.                                    </u>		
Quality Mar	nager	Safelite Autoglass, Inc.			
		_1			

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 2/98 Rpt: 13/117
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Safelite Gro	up, Inc. PAC		00068710
4 Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
08/09/2024	Alfman, Chad		\$5.00
	6 Contributor address; City; State; Zip Code		
	Columbus, OH 43235		
-	upation / Job title (See Instructions)	9 Employer (See Instructions)	)
Quality Man	ager	Safelite Autoglass, Inc.	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
08/16/2024	08/16/2024 Alfman, Chad		\$5.00
	Contributor address; City; State; Zip Code		
Dringing and	Columbus, OH 43235		
Quality Man	upation / Job title (See Instructions)	Employer (See Instructions) Safelite Autoglass, Inc.	·)
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
08/23/2024			\$5.00
	Contributor address; City; State; Zip Code		
	Columbus, OH 43235		
Principal occu	Jupation / Job title (See Instructions)	Employer (See Instructions)	;)
Quality Man	ager	Safelite Autoglass, Inc.	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
08/30/2024	Alfman, Chad		\$5.00
	Contributor address; City; State; Zip Code		
	Columbus, OH 43235		
-	upation / Job title (See Instructions)	Employer (See Instructions)	.)
Quality Man	ager	Safelite Autoglass, Inc.	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
09/06/2024	Alfman, Chad		\$5.00
	Contributor address; City; State; Zip Code		
Di dadaan	Columbus, OH 43235		
-	upation / Job title (See Instructions)	Employer (See Instructions)	.)
Quality Man	ager	Safelite Autoglass, Inc.	

The Instru	iction Guide explains how to complete this f	form.		tal pages Schedule A1: h: 3/98 Rpt: 14/117	
2 FILER NAME			3 File	er ID (Ethics Commission	ı Filers)
Safelite Gro	pup, Inc. PAC			068710	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	<b>7</b> Am	nount of Contribution (\$)	
09/13/2024	Alfman, Chad				\$5.00
	6 Contributor address; City; State; Zip Code				
	Columbus, OH 43235				
-	upation / Job title (See Instructions)	9 Employer (See Instructions)	)		
Quality Mar	lager	Safelite Autoglass, Inc.			
Date	Full name of contributor out-of-state PAC (ID#:	)	Am	nount of Contribution (\$)	_
09/20/2024	Alfman, Chad				\$5.00
	Contributor address; City; State; Zip Code				
	Columbus, OH 43235				
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	.)		
Quality Mar		Safelite Autoglass, Inc.	)		
Date	Full name of contributor out-of-state PAC (ID#:		Am	nount of Contribution (\$)	
09/27/2024		/			\$5.00
00/2//202	Contributor address; City; State; Zip Code				40.00
	Columbus, OH 43235				
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	)		
Quality Mar	nager	Safelite Autoglass, Inc.			
Date	Full name of contributor out-of-state PAC (ID#:	)	Am	nount of Contribution (\$)	
10/04/2024	Alfman, Chad				\$5.00
	Contributor address; City; State; Zip Code				
Dringingloop	Columbus, OH 43235		Ļ		
Quality Mar	upation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Am	nount of Contribution (\$)	ቀር ባህ
10/11/2024					\$5.00
	Contributor address; City; State; Zip Code				
	Columbus, OH 43235				
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	.)		
Quality Mar		Safelite Autoglass, Inc.			
		<u> </u>			

<u> </u>						
	The Instruc	ction Guide explains how to complete this f	iorm.	1	Total pages Schedule A1: Sch: 4/98 Rpt: 15/117	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	Jp, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	10/18/2024	Alfman, Chad				\$5.00
		6 Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Quality Mana	ager	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	10/25/2024	Alfman, Chad				\$5.00
		Contributor address; City; State; Zip Code		1		
		Columbus OLI 12225				
$\vdash$	Dringinal agou	Columbus, OH 43235 pation / Job title (See Instructions)		<u> </u>		
	Quality Mana		Employer (See Instructions Safelite Autoglass, Inc.	5)		
╞			г			
	Date 07/05/2024	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$96.15
	0770572024					<b>Φ</b> 90.T0
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
┢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	SVP Custom	ner, Brand, Tech	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/12/2024	Cacchillo, Renee				\$96.15
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	SVP Custom	ner, Brand, Tech	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/19/2024	Cacchillo, Renee				\$96.15
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> נו		
		ner, Brand, Tech	Safelite Autoglass, Inc.	,		
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	The Instruc	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 5/98 Rpt: 16/117	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	ıp, Inc. PAC			00068710	
4	Date     5 Full name of contributor     out-of-state PAC (ID#:)			7	Amount of Contribution (\$)	
	07/26/2024	Cacchillo, Renee				\$96.15
		6 Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	SVP Custom	er, Brand, Tech	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (I	D#:)		Amount of Contribution (\$)	
	08/02/2024	Cacchillo, Renee				\$96.15
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	SVP Custom	er, Brand, Tech	Safelite Autoglass, Inc.	_		
	Date     Full name of contributor     out-of-state PAC (ID#:)			Amount of Contribution (\$)		
	08/09/2024	Cacchillo, Renee				\$96.15
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
		er, Brand, Tech	Safelite Autoglass, Inc.	,		
⊨	Date	Full name of contributor Out-of-state PAC (I		Г	Amount of Contribution (\$)	
	08/16/2024	Cacchillo, Renee	Dm)			\$96.15
		Contributor address; City; State; Zip Code		ł		
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	SVP Custom	er, Brand, Tech	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (I	D#:)		Amount of Contribution (\$)	
	08/23/2024	Cacchillo, Renee				\$96.15
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235	-			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	SVP Custom	er, Brand, Tech	Safelite Autoglass, Inc.			

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

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/98 Rpt: 18/117	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
[	Safelite Grou	ıp, Inc. PAC		Ū	00068710	1 11010)
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	10/04/2024	2024 Cacchillo, Renee				\$96.15
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	SVP Custom	ner, Brand, Tech	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/11/2024	Cacchillo, Renee				\$96.15
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
$\vdash$	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	-	ner, Brand, Tech	Safelite Autoglass, Inc.	'		
╞	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	10/18/2024	Cacchillo, Renee				\$96.15
	10/10/202	Contributor address; City; State; Zip Code				Ψ00. <u></u> _0
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	SVP Custom	ner, Brand, Tech	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/25/2024	Cacchillo, Renee				\$96.15
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	-	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	SVP Custom	ner, Brand, Tech	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	±5.00
	07/05/2024	Canova, Christian				\$2.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	District Mana	· · ·	Safelite Autoglass, Inc.	9		
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	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/98 Rpt: 19/117	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	ıp, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	07/12/2024	Canova, Christian				\$2.00
		6 Contributor address; City; State; Zip Code		1		
		Columbus OL 12225				
Ļ	Drincipal occu	Columbus, OH 43235 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
8	District Mana		Safelite Autoglass, Inc.	5)		
╞	Date			Γ	Amount of Contribution (\$)	
	07/19/2024	Full name of contributor out-of-state PAC (ID#: Canova, Christian	/			\$2.00
	0111012021					Ψ2.00
		Contributor address, City, State, Zip Code				
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/05/2024	Carr, Brenton				\$5.00
		Contributor address; City; State; Zip Code		]		
		Columbus, OH 43235				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Regional VP		Safelite Autoglass, Inc.			
⊢	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/12/2024	Carr, Brenton				\$5.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235		Ĺ		
	Principal occu Regional VP	pation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	5)		
				-	· - · · · · · · · · · · · · · · · · · ·	
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	ቀር በበ
	07/19/2024	Carr, Brenton				\$5.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Regional VP		Safelite Autoglass, Inc.			
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	The Instru	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 9/98 Rpt: 20/117	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	ıp, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (	(ID#:)	7	Amount of Contribution (\$)	
	07/26/2024	Carr, Brenton				\$5.00
		6 Contributor address; City; State; Zip Code		1		
Ļ	Drineirelessu	Columbus, OH 43235				
8	Regional VP	pation / Job title (See Instructions)	9 Employer (See Instructions Safelite Autoglass, Inc.	s)		
╘	_					
	Date		(ID#:)		Amount of Contribution (\$)	<b>45 00</b>
	08/02/2024					\$5.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Regional VP		Safelite Autoglass, Inc.	-,		
⊨	Date	Full name of contributor out-of-state PAC (	(ID#·)	Г	Amount of Contribution (\$)	
	08/09/2024	Carr, Brenton	(ID#)			\$5.00
		Columbus, OH 43235				
	•	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Regional VP		Safelite Autoglass, Inc.			
	Date	Full name of contributor 🔲 out-of-state PAC (	(ID#:)		Amount of Contribution (\$)	
	08/16/2024	Carr, Brenton				\$5.00
		Contributor address; City; State; Zip Code				
		Columbus OH 12225				
⊢	Bringinal occu	Columbus, OH 43235 pation / Job title (See Instructions)	Employer (See Instructions			
	Regional VP	,	Safelite Autoglass, Inc.	5)		
╞	_			<u> </u>		
	Date 08/23/2024	Full name of contributor out-of-state PAC ( Carr, Brenton	(ID#:)		Amount of Contribution (\$)	\$5.00
	00/23/2024	Contributor address; City; State; Zip Code				φ3.00
		Contributor address, City, State, Zip Code				
		Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Regional VP		Safelite Autoglass, Inc.			
⊢						
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The Instruction C	Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/98 Rpt: 21/117	
2 FILER NAME			3	Filer ID (Ethics Commission	Filers)
Safelite Group, Inc.	PAC			00068710	
4 Date 5 Full	name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
08/30/2024 Car	rr, Brenton				\$5.00
6 Con	ntributor address; City; State; Zip Code		1		
Col	lumbus, OH 43235				
8 Principal occupation / .	Job title (See Instructions)	9 Employer (See Instructions	s)		
Regional VP		Safelite Autoglass, Inc.			
Date Full	name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
09/06/2024 Car	rr, Brenton				\$5.00
	ntributor address; City; State; Zip Code		•		
Coli	lumbus, OH 43235				
Principal occupation / 、	Job title (See Instructions)	Employer (See Instructions	s)		
Regional VP		Safelite Autoglass, Inc.			
Date Full	name of contributor out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
	rr, Brenton	/		, anotan or contraction (*,	\$5.00
	ntributor address; City; State; Zip Code		•		+
	and the set of the set				
Col	lumbus, OH 43235				
	Job title (See Instructions)	Employer (See Instructions	L S)		
Regional VP	· · · · · · · · · · · · · · · · · · ·	Safelite Autoglass, Inc.	,		
-	name of contributor out-of-state PAC (ID#:	-	Τ	Amount of Contribution (\$)	
	name of contributor out-of-state PAC (ID#: rr, Brenton	/			\$5.00
					φ0.00
Con	ntributor address; City; State; Zip Code				
Col	lumbus, OH 43235				
	Job title (See Instructions)	Employer (See Instructions	<u>د)</u>		
Regional VP		Safelite Autoglass, Inc.	5)		
-			T		
	name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	ቀር በበ
	rr, Brenton				\$5.00
Con	ntributor address; City; State; Zip Code				
	lumbus, OH 43235	Encloser (Cas Instructions	Ĺ		
	Job title (See Instructions)	Employer (See Instructions	S)		
Regional VP		Safelite Autoglass, Inc.			

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	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 11/98 Rpt: 22/117	
2	2 FILER NAME			3	Filer ID (Ethics Commission	i Filers)
	Safelite Grou	ıp, Inc. PAC			00068710	,
4	Date	5 Full name of contributor 🗌 out-of-state PAC (ID	#:)	7	Amount of Contribution (\$)	
	10/04/2024	Carr, Brenton				\$5.00
		6 Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Regional VP		Safelite Autoglass, Inc.			
	Date	Full name of contributor 🛛 out-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	10/11/2024	Carr, Brenton				\$5.00
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235	i			
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Regional VP		Safelite Autoglass, Inc.			
	Date Full name of contributor out-of-state PAC (ID#:)			Amount of Contribution (\$)		
	10/18/2024	Carr, Brenton				\$5.00
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235	•			
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Regional VP		Safelite Autoglass, Inc.			
	Date	Full name of contributor 🛛 out-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	10/25/2024	Carr, Brenton				\$5.00
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235	i			
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Regional VP		Safelite Autoglass, Inc.			
	Date	Full name of contributor 🛛 out-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	07/05/2024	Corbin, Trisha				\$10.00
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Corporate C	ounsel	Safelite Group Inc			

	The Instruc	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 12/98 Rpt: 23/117	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	Jp, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	07/12/2024	Corbin, Trisha				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235	i			
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Corporate C	ounsel	Safelite Group Inc			
	Date	Full name of contributor out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)	
	07/19/2024	Corbin, Trisha				\$10.00
		Contributor address; City; State; Zip Code				
		Columbus OH 12225				
$\vdash$	Dringing occu	Columbus, OH 43235 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Corporate Co		Safelite Group Inc	5)		
╞	-			1		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<u>ቀ</u> 10 00
	07/26/2024	Corbin, Trisha				\$10.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
⊢	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Corporate Co	ounsel	Safelite Group Inc			
╞	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	08/02/2024	Corbin, Trisha				\$10.00
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Corporate Co	ounsel	Safelite Group Inc			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	08/09/2024	Corbin, Trisha				\$10.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
L	Dringing ogg		Employer (See Instructions			
	Corporate Co	pation / Job title (See Instructions) ounsel	Employer (See Instructions Safelite Group Inc	5)		
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	The Instruc	ction Guide explains how to complete th	his form.	1	Total pages Schedule A1: Sch: 13/98 Rpt: 24/117	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	лр, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC	(ID#:)	7	Amount of Contribution (\$)	
	08/16/2024	08/16/2024 Corbin, Trisha				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u></u>		
ľ	Corporate Co		Safelite Group Inc	5)		
╞	-			Т	Amount of Contribution (\$)	
	Date 08/23/2024	Corbin, Trisha	(ID#:)		Amount of Contribution (\$)	\$10.00
	0012012024					Φ10.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Corporate Co		Safelite Group Inc			
⊢	Date Full name of contributor out-of-state PAC (ID#:)		Τ	Amount of Contribution (\$)		
	08/30/2024	Corbin, Trisha				\$10.00
		Contributor address; City; State; Zip Code		·		
		Columbus, OH 43235				
	-	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Corporate Co	ounsel	Safelite Group Inc			
	Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	09/06/2024	Corbin, Trisha				\$10.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>م)</u>		
	Corporate Co	,	Safelite Group Inc	3)		
╞	-			Т	Amount of Contribution (\$)	
	Date 09/13/2024	Full name of contributor Out-of-state PAC Corbin, Trisha	(ID#:)			\$10.00
	0311312024	Contributor address; City; State; Zip Code		·		Ψ10.00
		Continuation address, City, State, Zip Code				
		Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Corporate Co	ounsel	Safelite Group Inc			
1						

	The Instruc	ction Guide explains how to complete th	nis form.	1	Total pages Schedule A1: Sch: 14/98 Rpt: 25/117	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	лр, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (	(ID#:)	7	Amount of Contribution (\$)	
	09/20/2024	Corbin, Trisha				\$10.00
	ļ	6 Contributor address; City; State; Zip Code		1		
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	ļ					
Ļ	<b>D</b> 1 - 1 - 1 - 0 - 0 - 0	Columbus, OH 43235		Ĺ		
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Corporate Co		Safelite Group Inc	-		
	Date		(ID#:)		Amount of Contribution (\$)	
	09/27/2024 Corbin, Trisha				\$10.00	
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	ļ	Columbus, OH 43235				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ر)</u>		
	Corporate Co		Safelite Group Inc	3)		
╞	Date			Т	Amount of Contribution (\$)	
	10/04/2024	Full name of contributor Out-of-state PAC ( Corbin, Trisha	(ID#:)			\$10.00
	10/04/202-1					Ψ10.00
	ļ	Contributor address, City, State, Zip Code				
	ļ					
	ļ	Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Corporate Co	ounsel	Safelite Group Inc			
	Date	Full name of contributor out-of-state PAC (	(ID#:)	Τ	Amount of Contribution (\$)	
	10/11/2024	Corbin, Trisha				\$10.00
	ļ	Contributor address; City; State; Zip Code		"		
	ļ					
	ļ					
		Columbus, OH 43235		Ĺ		
	-	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Corporate Co		Safelite Group Inc	_		
	Date	Full name of contributor Out-of-state PAC (	(ID#:)		Amount of Contribution (\$)	
	10/18/2024	Corbin, Trisha				\$10.00
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	ļ	Columbus, OH 43235				
┝	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>റ</u>		
	Corporate Co		Safelite Group Inc	5)		
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	The Instru	ction Guide explains how to comp	lete this for	r <b>m</b> .	1	Total pages Schedule A1: Sch: 15/98 Rpt: 26/117	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	лр, Inc. PAC				00068710	
4	Date	5 Full name of contributor out-of-sta	tate PAC (ID#:	)	7	Amount of Contribution (\$)	
	10/25/2024	Corbin, Trisha					\$10.00
		6 Contributor address; City; State; Zip Coc					
	ļ						
		Columbus, OH 43235					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	;)		
	Corporate Co	ounsel		Safelite Group Inc			
	Date	Full name of contributor 🔲 out-of-sta	tate PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	07/05/2024	Diefenbach, Robert					\$3.50
	ļ	Contributor address; City; State; Zip Coc					
	ļ						
	Drivelasou	Columbus, OH 43235			ŕ		
		pation / Job title (See Instructions)		Employer (See Instructions	;)		
	District Mana			Safelite Autoglass, Inc.	—		
	Date		tate PAC (ID#:	)		Amount of Contribution (\$)	
	07/12/2024	Diefenbach, Robert					\$3.50
	ļ	Contributor address; City; State; Zip Coc	de				
		Columbus, OH 43235					
_	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	District Mana			Safelite Autoglass, Inc.	ワ		
		-			—	Amount of Contribution (¢)	
	Date 07/19/2024	Full name of contributor out-of-sta	tate PAC (ID#:	)		Amount of Contribution (\$)	\$3.50
	0111912024	·					φ3.00
	ļ	Contributor address; City; State; Zip Coc	je				
		Columbus, OH 43235					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	上 5)		
	District Mana			Safelite Autoglass, Inc.	,		
╞	Date	Full name of contributor	tate PAC (ID#:	)	_	Amount of Contribution (\$)	
	07/26/2024	Diefenbach, Robert	uie i / ie (.e	/		· · · · · · · · · · · · · · · · · · ·	\$3.50
		Contributor address; City; State; Zip Coc	de				-
	ļ						
		Columbus, OH 43235					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	District Mana	ager		Safelite Autoglass, Inc.			

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	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/98 Rpt: 27/117	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	Jp, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	08/02/2024	Diefenbach, Robert				\$3.50
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	08/09/2024	08/09/2024 Diefenbach, Robert				\$3.50
	Contributor address; City; State; Zip Code					
		Columbus, OH 43235				
	-	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.			
	Date     Full name of contributor     out-of-state PAC (ID#:)       08/16/2024     Diefenbach, Robert			Amount of Contribution (\$)		
						\$3.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235	<u> </u>	Ļ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	District Mana		Safelite Autoglass, Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/23/2024	Diefenbach, Robert				\$3.50
		Contributor address; City; State; Zip Code				
		Columbus OLI 4222E				
L	Dringingl occu	Columbus, OH 43235 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	District Mana		Employer (See Instructions Safelite Autoglass, Inc.	5)		
			_			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>*</b> 2 F0
	08/30/2024	Diefenbach, Robert				\$3.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
L	Dringingloggy		Employer (Cap Instructions			
	District Mana	pation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	5)		
		iyei	Salelile Aulogiass, Inc.			

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

The Instruction Gu	ide explains how to complete this f	iorm.		Total pages Schedule A1: Sch: 18/98 Rpt: 29/117	
2 FILER NAME				Filer ID (Ethics Commission	Filers)
Safelite Group, Inc. PA	AC		1	00068710	
4 Date 5 Full na	me of contributor 🔲 out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
10/11/2024 Diefer	nbach, Robert				\$3.50
6 Contrik	outor address; City; State; Zip Code		1		
Colum	nbus, OH 43235				
8 Principal occupation / Job		9 Employer (See Instructions)	<u> </u>		
District Manager	,	Safelite Autoglass, Inc.	-,		ļ
-	me of contributor 🛛 out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	hbach, Robert		<i>'</i>		\$3.50
	butor address; City; State; Zip Code		•		Ψ0.01
	עוטו מעטובסס, כווא, סומוכ, בוף סטעכ				ļ
Colum	nbus, OH 43235				I
Principal occupation / Job		Employer (See Instructions)	5)		
District Manager		Safelite Autoglass, Inc.	-		I
Date Full na	ume of contributor out-of-state PAC (ID#:_	)	Γ,	Amount of Contribution (\$)	
	hbach, Robert				\$3.50
	outor address; City; State; Zip Code		•		
Colum	nbus, OH 43235				
Principal occupation / Job	title (See Instructions)	Employer (See Instructions)	<u></u> 5)		
District Manager		Safelite Autoglass, Inc.			
Date Full na	me of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
07/05/2024 Donai	s, James				\$12.50
Contrib	outor address; City; State; Zip Code		1		
	nbus, OH 43235				
Principal occupation / Job	title (See Instructions)	Employer (See Instructions)	3)		
District Manager		Safelite Autoglass, Inc.			
	me of contributor 🔲 out-of-state PAC (ID#:_	)	<b>_</b>	Amount of Contribution (\$)	
07/12/2024 Donai	s, James				\$12.50
Contrib	outor address; City; State; Zip Code		1		
Colum	nbus, OH 43235				
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Principal occupation / Job		Employer (See Instructions)	5)		
		Employer (See Instructions) Safelite Autoglass, Inc.	5)		

	The Instru	ction Guide explains how to complete this	; form.	1	Total pages Schedule A1: Sch: 19/98 Rpt: 30/117	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Safelite Grou	up, Inc. PAC			00068710	-
4	Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7	Amount of Contribution (\$)	
	07/19/2024	Donais, James				\$12.50
		6 Contributor address; City; State; Zip Code		ł		
	ļ					
	ļ					
		Columbus, OH 43235				
8	Principal occu	I upation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
	District Mana		Safelite Autoglass, Inc.	-		
╞	Date	Full name of contributor Out-of-state PAC (ID#		Τ	Amount of Contribution (\$)	
	07/05/2024	Ebbinghaus, Brandon	τ,		, income of Contraction (,	\$5.00
	01,00,202	Contributor address; City; State; Zip Code		•		<b>40.0</b> 0
		Continuation address, City, State, Zip Code				
	ļ	Columbus, OH 43235				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	L s)		
	Quality Mana		Safelite Autoglass, Inc.	-,		
⊨	Date	Full name of contributor Out-of-state PAC (ID#		Τ	Amount of Contribution (\$)	
	07/12/2024	Ebbinghaus, Brandon	#/		Allount of Contribution (4)	\$5.00
	0111212021	Contributor address; City; State; Zip Code				Ψ0.00
	ļ	Contributor address, City, State, Zip Code				
		Columbus, OH 43235				
$\vdash$	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	L s)		
	Quality Mana		Safelite Autoglass, Inc.	-)		
⊨				Τ	Amount of Contribution (\$)	
	Date 07/19/2024		#:)			\$5.00
	07/19/2024	Ebbinghaus, Brandon				Φ <u></u> <u></u> <u></u> 00.00
	ļ	Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
┝	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	e)		
	Quality Mana		Safelite Autoglass, Inc.	>)		
⊨				<del>—</del>		
	Date	Full name of contributor out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	ቀር በብ
	07/26/2024	Ebbinghaus, Brandon				\$5.00
	ļ	Contributor address; City; State; Zip Code				
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	D i sinchean	Columbus, OH 43235		ŕ		
		Ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Quality Mana	Ager	Safelite Autoglass, Inc.			
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The Instru	uction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 20/98 Rpt: 31/117
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Safelite Gro	oup, Inc. PAC		00068710
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
08/02/2024	Ebbinghaus, Brandon		\$5.00
	6 Contributor address; City; State; Zip Code		
	Columbus, OH 43235		
	cupation / Job title (See Instructions)	9 Employer (See Instructions)	)
Quality Mai		Safelite Autoglass, Inc.	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
08/09/2024	Ebbinghaus, Brandon		\$5.00
	Contributor address; City; State; Zip Code		
	Columbus OLI 42225		
Dringingloop	Columbus, OH 43235		<u> </u>
	cupation / Job title (See Instructions)	Employer (See Instructions) Safelite Autoglass, Inc.	)
Quality Mai			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
08/16/2024	Ebbinghaus, Brandon		\$5.00
	Contributor address; City; State; Zip Code		
	Columbus, OH 43235		
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>
Quality Mar		Safelite Autoglass, Inc.	)
	-	<u> </u>	Amount of Contribution (\$)
Date 08/23/2024		)	Amount of Contribution (\$) \$5.00
0012312024			φ5.00
	Contributor address; City; State; Zip Code		
	Columbus, OH 43235		
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions	() ;)
Quality Mar		Safelite Autoglass, Inc.	,
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)
08/30/2024		/	\$5.00
00/00/202	Contributor address; City; State; Zip Code		
	Columbus, OH 43235		
Principal occ	L cupation / Job title (See Instructions)	Employer (See Instructions)	;)
Quality Mai		Safelite Autoglass, Inc.	
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	The Instru	ction Guide explains how to con	nplete this for	rm.	1	Total pages Schedule A1: Sch: 21/98 Rpt: 32/117	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	up, Inc. PAC				00068710	
4	Date	5 Full name of contributor out-of	of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	09/06/2024	Ebbinghaus, Brandon					\$5.00
		6 Contributor address; City; State; Zip C	Code		1		
	ļ	1					
		1					
		Columbus, OH 43235					
		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Quality Mana	ager		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of	of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	09/13/2024	Ebbinghaus, Brandon					\$5.00
		Contributor address; City; State; Zip C	Code		1		
	ļ	1					
		Columbus, OH 43235					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Quality Mana	ager		Safelite Autoglass, Inc.			
	Date	Full name of contributor	of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	09/20/2024	Ebbinghaus, Brandon					\$5.00
	1	Contributor address; City; State; Zip C	Code		1		
		1					
		1					
		Columbus, OH 43235					
		pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Quality Mana	ager	L	Safelite Autoglass, Inc.			
	Date	Full name of contributor 🔲 out-of	of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	09/27/2024	Ebbinghaus, Brandon					\$5.00
	ļ	Contributor address; City; State; Zip C	Code		1		
	ļ	1					
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		Columbus, OH 43235	r		L		
		ipation / Job title (See Instructions)		Employer (See Instructions	;)		
	Quality Mana	ager	L	Safelite Autoglass, Inc.	_		
	Date		of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	10/04/2024	Ebbinghaus, Brandon					\$5.00
	ļ	Contributor address; City; State; Zip C	Code		1		
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		Columbus, OH 43235					
		pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Quality Mana	ager		Safelite Autoglass, Inc.			

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	The Instrue	ction Guide explains how to complete t	his form.	1	Total pages Schedule A1: Sch: 22/98 Rpt: 33/117	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	ıp, Inc. PAC			00068710	-
4	Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7	Amount of Contribution (\$)	
	10/11/2024	Ebbinghaus, Brandon				\$5.00
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235	- I			
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Quality Mana		Safelite Autoglass, Inc.	-		
	Date		C (ID#:)		Amount of Contribution (\$)	
	10/18/2024	Ebbinghaus, Brandon				\$5.00
		Contributor address; City; State; Zip Code				
	Dringing oog	Columbus, OH 43235	Employer (Coo Instructions	<u> </u>		
	Quality Mana	pation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	S)		
				<del></del>		
	Date	Full name of contributor out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	<u>م</u> ح 00
	10/25/2024					\$5.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Quality Mana	· · · · ·	Safelite Autoglass, Inc.	-,		
╞	Date	Full name of contributor out-of-state PAC		Т	Amount of Contribution (\$)	
	07/05/2024	Ellington, Brad	, (ID#,		Allount of continue.co. (+)	\$15.00
	000	Contributor address; City; State; Zip Code				<b>T-</b>
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	District Mana	ager	Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	
	07/12/2024	Ellington, Brad				\$15.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	District Mana	ager	Safelite Autoglass, Inc.			

	The Instru	ction Guide explains how to complete	this fo	rm.	1	Total pages Schedule A1: Sch: 23/98 Rpt: 34/117	
2	FILER NAME				3	Filer ID (Ethics Commission	ı Filers)
	Safelite Grou	up, Inc. PAC				00068710	
4	Date	5 Full name of contributor out-of-state PA	AC (ID#:	)	7	Amount of Contribution (\$)	
	07/19/2024	Ellington, Brad	-				\$15.00
	ļ	6 Contributor address; City; State; Zip Code					
	ļ						
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		Columbus, OH 43235					
8	Principal occu	ipation / Job title (See Instructions)	ć	9 Employer (See Instructions	5)		
	District Mana	ager		Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PA	AC (ID#:	)		Amount of Contribution (\$)	
	07/26/2024	Ellington, Brad					\$15.00
	ļ	Contributor address; City; State; Zip Code					
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		Columbus, OH 43235					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions	5)		
	District Mana	ager		Safelite Autoglass, Inc.			
╞	Date Full name of contributor out-of-state PAC (ID#:)		)		Amount of Contribution (\$)		
	08/02/2024	4 Ellington, Brad				\$15.00	
	Contributor address; City; State; Zip Code						
	ļ	1					
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		Columbus, OH 43235					
		ipation / Job title (See Instructions)		Employer (See Instructions	5)		
	District Mana	ager		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PA	AC (ID#:	)		Amount of Contribution (\$)	
	08/09/2024	Ellington, Brad					\$15.00
		Contributor address; City; State; Zip Code					
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		1					
		Columbus, OH 43235					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	District Mana	ager		Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PA	AC (ID#:	)		Amount of Contribution (\$)	
	08/16/2024	Ellington, Brad					\$15.00
	1	Contributor address; City; State; Zip Code			1		
	ļ	1					
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		Columbus, OH 43235					
		ipation / Job title (See Instructions)		Employer (See Instructions	5)		
	District Mana	ager		Safelite Autoglass, Inc.			

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 24/98 Rpt: 35/117	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	up, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	08/23/2024	Ellington, Brad				\$15.00
	ļ	6 Contributor address; City; State; Zip Code		1		
	ļ					
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#	ŧ:)	Γ	Amount of Contribution (\$)	
	08/30/2024	Ellington, Brad				\$15.00
	ļ	Contributor address; City; State; Zip Code		1		
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	Drizpinal appu	Columbus, OH 43235		<u> </u>		
	District Mana	ipation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	5)		
⊨		-		1		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	Φ1Ε 00
	09/06/2024	Ellington, Brad				\$15.00
		Contributor address; City; State; Zip Code				
	ļ	Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	09/13/2024	Ellington, Brad				\$15.00
	ł	Contributor address; City; State; Zip Code		1		
	ļ					
		Columbus, OH 43235	- i			
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	09/20/2024	Ellington, Brad				\$15.00
		Contributor address; City; State; Zip Code				
	ļ					
	ļ	Columbus, OH 43235				
	Drincinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	District Mana		Safelite Autoglass, Inc.	5)		
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 25/98 Rpt: 36/117	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Safelite Grou	Jp, Inc. PAC			00068710	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	09/27/2024	Ellington, Brad				\$15.00
	ļ	6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	District Mana	ager	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Γ	Amount of Contribution (\$)	
	10/04/2024	Ellington, Brad				\$15.00
		Contributor address; City; State; Zip Code				
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	Dringing occu	Columbus, OH 43235	Employer (See Instructions	$\overline{\Gamma}$		
	District Mana	ipation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	5)		
		-		—		
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$15.00
	10/11/2024	Ellington, Brad				Φ10.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<b></b> ;)		
	District Mana	ager	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	10/18/2024	Ellington, Brad				\$15.00
		Contributor address; City; State; Zip Code				
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		Columbus, OH 43235	- · · · · · · · · · · · · · · · · · · ·	Ĺ		
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	District Mana		Safelite Autoglass, Inc.	<del>, -</del>		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	÷15 00
	10/25/2024	Ellington, Brad				\$15.00
		Contributor address; City; State; Zip Code				
	ļ					
		Columbus, OH 43235				
$\vdash$	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	District Mana		Safelite Autoglass, Inc.	<i>'</i>		
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	The Instruc	ction Guide explains how to complete t	this form.	1	Total pages Schedule A1: Sch: 26/98 Rpt: 37/117	
2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
	Safelite Grou	лр, Inc. PAC			00068710	
4	Date	5 Full name of contributor Out-of-state PAC	C (ID#:)	7	Amount of Contribution (\$)	
	07/05/2024	Elliott, Cynthia				\$96.15
	ł	6 Contributor address; City; State; Zip Code				
	ļ					
	ļ					
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instruction			
	VP and Gene	eral Counsel	Safelite Autoglass, Inc.			
	Date	Full name of contributor 🔲 out-of-state PAC	C (ID#:)	Τ	Amount of Contribution (\$)	
	07/12/2024	Elliott, Cynthia				\$96.15
	ļ	Contributor address; City; State; Zip Code		1		
	ļ					
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		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instruction			
	VP and Gene	eral Counsel	Safelite Autoglass, Inc.			
	Date	Full name of contributor 🔲 out-of-state PAC	C (ID#:)	Ţ	Amount of Contribution (\$)	
	07/19/2024	Elliott, Cynthia				\$96.15
	ļ	Contributor address; City; State; Zip Code		"		
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		Columbus, OH 43235		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instruction			
	VP and Gene		Safelite Autoglass, Inc.	_		
Γ	Date	Full name of contributor out-of-state PAC	)		Amount of Contribution (\$)	
	07/26/2024	Elliott, Cynthia				\$96.15
	ļ	Contributor address; City; State; Zip Code		"]		
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L	Di sinal assu	Columbus, OH 43235		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instruction			
	VP and Gene		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	
	08/02/2024	Elliott, Cynthia				\$96.15
	ļ	Contributor address; City; State; Zip Code				
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		Columbus, OH 43235		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instruction			
	VP and Gene	eral Counsei	Safelite Autoglass, Inc.			

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	The Instruc	ction Guide explains how to complete this	1	Total pages Schedule A1: Sch: 27/98 Rpt: 38/117		
2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
	Safelite Grou	Jp, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	:)	7	Amount of Contribution (\$)	
	08/09/2024	Elliott, Cynthia				\$96.15
	ļ	6 Contributor address; City; State; Zip Code		ł		
	ļ					
	ļ					
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	VP and Gene	eral Counsel	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Γ	Amount of Contribution (\$)	
	08/16/2024	Elliott, Cynthia				\$96.15
	ļ	Contributor address; City; State; Zip Code		1		
	ļ					
	ļ					
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP and Gene	eral Counsel	Safelite Autoglass, Inc.			
	Date		ti)		Amount of Contribution (\$)	
	08/23/2024	Elliott, Cynthia				\$96.15
	ļ	Contributor address; City; State; Zip Code		1		
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		Columbus, OH 43235		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP and Gene		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	:)		Amount of Contribution (\$)	
	08/30/2024	Elliott, Cynthia				\$96.15
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	ļ	Columbus, OH 43235				
<u> </u>	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	VP and Gene		Safelite Autoglass, Inc.	5)		
╞				<del>.</del>		
	Date	Full name of contributor out-of-state PAC (ID#:	:)		Amount of Contribution (\$)	ቀባድ 15
	09/06/2024	Elliott, Cynthia				\$96.15
	ſ	Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> د)		
	VP and Gene		Safelite Autoglass, Inc.	,		
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	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 28/98 Rpt: 39/117	
2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
	Safelite Grou	Jp, Inc. PAC			00068710	
4	Date 09/13/2024	5 Full name of contributor Out-of-state PAC (ID:	#:)	7	Amount of Contribution (\$)	\$96.15
	09/13/2024	Elliott, Cynthia				Φ <u>90</u> .T0
	ļ	6 Contributor address; City; State; Zip Code				
	ļ	Columbus, OH 43235				
8	Principal occu	I pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	VP and Gene	eral Counsel	Safelite Autoglass, Inc.			
╞	Date	Full name of contributor out-of-state PAC (IDa	#:)	Γ	Amount of Contribution (\$)	
	09/20/2024	Elliott, Cynthia				\$96.15
	ļ	Contributor address; City; State; Zip Code		1		
	ļ					
	ļ					
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	3)		_
	VP and Gene	eral Counsel	Safelite Autoglass, Inc.			
	Date	Full name of contributor 🔲 out-of-state PAC (ID:	#:)	Γ	Amount of Contribution (\$)	
	09/27/2024	Elliott, Cynthia				\$96.15
	ļ	Contributor address; City; State; Zip Code		]		
	ſ					
	ļ	Columbus, OH 43235				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	د) ا		
	VP and Gene		Safelite Autoglass, Inc.	"		
╞	Date	Full name of contributor Out-of-state PAC (ID:			Amount of Contribution (\$)	
	10/04/2024	Elliott, Cynthia	#/			\$96.15
	10/0 // 202 /	Contributor address; City; State; Zip Code		•		<b>400.</b>
	ļ					
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP and Gene	eral Counsel	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID	#:)	Γ	Amount of Contribution (\$)	
	10/11/2024	Elliott, Cynthia				\$96.15
	1	Contributor address; City; State; Zip Code		1		
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		Columbus, OH 43235		Ļ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP and Gene		Safelite Autoglass, Inc.			

	The Instruc	ction Guide explains how to comple	ete this for	rm.	1	Total pages Schedule A1: Sch: 29/98 Rpt: 40/117	
2	2 FILER NAME			3	Filer ID (Ethics Commission	Filers)	
	Safelite Grou	ıp, Inc. PAC				00068710	
4	Date	5 Full name of contributor out-of-state	e PAC (ID#:	)	7	Amount of Contribution (\$)	
	10/18/2024	Elliott, Cynthia					\$96.15
		6 Contributor address; City; State; Zip Code					
		l					
		I					
		Columbus, OH 43235					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	)		
	VP and Gene	eral Counsel		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state	e PAC (ID#:	)		Amount of Contribution (\$)	
	10/25/2024	Elliott, Cynthia					\$96.15
		Contributor address; City; State; Zip Code					
		l					
		Columbus, OH 43235	r				
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	VP and Gene		L	Safelite Autoglass, Inc.			
	Date		e PAC (ID#:	)		Amount of Contribution (\$)	
	07/05/2024	Henry, Robert					\$7.50
		Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
$\vdash$	Drincinal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
		les & Support		Safelite Autoglass, Inc.	9		
╞					<b></b>	Amount of Contribution (\$)	
	Date 07/12/2024		e PAC (ID#:	)		Amount of Contribution (\$)	\$7.50
	0111212024	Henry, Robert					Φ1.00
		Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
		les & Support		Safelite Autoglass, Inc.			
⊨	Date	Full name of contributor	e PAC (ID#:	)		Amount of Contribution (\$)	
	07/19/2024	Henry, Robert	51 AG (B	,		/ inouni or control	\$7.50
		Contributor address; City; State; Zip Code					• -
		I					
		Columbus, OH 43235					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	VP Client Sa	les & Support		Safelite Autoglass, Inc.			
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SCHEDULE	A1
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Γ	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1:	
					Sch: 30/98 Rpt: 41/117	
2	2 FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	up, Inc. PAC			00068710	
4	Date	5 Full name of contributor Dut-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	07/05/2024	Howard, Glenn				\$2.00
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	07/12/2024	Howard, Glenn				\$2.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.	_		
	Date		)		Amount of Contribution (\$)	
	07/19/2024	Howard, Glenn				\$2.00
		Contributor address; City; State; Zip Code				
	Dringing ago	Columbus, OH 43235 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	District Mana	· · ·	Safelite Autoglass, Inc.	)		
╘				-		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>#0.00</b>
	07/26/2024	Howard, Glenn				\$2.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> י)		
	District Mana	· · ·	Safelite Autoglass, Inc.	<b>)</b>		
╞				<u> </u>		
	Date 08/02/2024	Full name of contributor out-of-state PAC (ID#: Howard, Glenn	)		Amount of Contribution (\$)	¢2.00
	08/02/2024					\$2.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ز)		
ĺ	District Mana	· · ·	Safelite Autoglass, Inc.	.,		
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SCHEDULE	A1
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Γ	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1:	
					Sch: 31/98 Rpt: 42/117	
2	2 FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	up, Inc. PAC			00068710	
4	Date	5 Full name of contributor Dut-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	08/09/2024	Howard, Glenn				\$2.00
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.			
	Date	Full name of contributor Dut-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	08/16/2024	Howard, Glenn				\$2.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.	_		
	Date		)		Amount of Contribution (\$)	
	08/23/2024	Howard, Glenn				\$2.00
		Contributor address; City; State; Zip Code				
		Columbus OLI 42225				
	Dringinglaggy	Columbus, OH 43235				
	District Mana	pation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	5)		
╘		- 		_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>#0.00</b>
	08/30/2024	Howard, Glenn				\$2.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> נו		
	District Mana		Safelite Autoglass, Inc.	"		
╞				_		
	Date	Full name of contributor out-of-state PAC (ID#: Howard, Glenn	)		Amount of Contribution (\$)	¢2.00
	09/06/2024					\$2.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
1	District Mana		Safelite Autoglass, Inc.	,		
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The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A1: Sch: 32/98 Rpt: 43/117	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Safelite Gro	up, Inc. PAC		00068710
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
09/13/2024	Howard, Glenn		\$2.0
	6 Contributor address; City; State; Zip Code		
	Columbus, OH 43235		
-	upation / Job title (See Instructions)	9 Employer (See Instructions	s)
District Man	ager	Safelite Autoglass, Inc.	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/20/2024	Howard, Glenn		\$2.0
	Contributor address; City; State; Zip Code		1
Driv vinel easy	Columbus, OH 43235		<u> </u>
Principal occu District Man	ipation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	5)
			T
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/27/2024	Howard, Glenn		\$2.0
	Contributor address; City; State; Zip Code		
	Columbus, OH 43235		
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
District Man	ager	Safelite Autoglass, Inc.	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/04/2024	Howard, Glenn		\$2.0
	Contributor address; City; State; Zip Code		
	Columbus, OH 43235		
-	upation / Job title (See Instructions)	Employer (See Instructions	s)
District Man	ager	Safelite Autoglass, Inc.	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/11/2024	Howard, Glenn		\$2.0
	Contributor address; City; State; Zip Code		
Dringingligge	Columbus, OH 43235		<u> </u>
District Man	Ipation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	S)

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 33/98 Rpt: 44/117	
2	FILER NAME			3	Filer ID (Ethics Commission	1 Filers)
	Safelite Grou	up, Inc. PAC			00068710	,
4	Date	5 Full name of contributor Dut-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	10/18/2024	Howard, Glenn				\$2.00
		6 Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/25/2024	Howard, Glenn				\$2.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/05/2024	Jeffries, Gretchen				\$25.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Corporate C	ounsel	Safelite Group Inc			
	Date	Full name of contributor Dut-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	07/12/2024	Jeffries, Gretchen				\$25.00
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Corporate C	ounsel	Safelite Group Inc			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/19/2024	Jeffries, Gretchen				\$25.00
	Contributor address; City; State; Zip Code					
		Columbus, OH 43235				
I		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Corporate C	ounsel	Safelite Group Inc			
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The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 34/98 Rpt: 45/117	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
Safelite Gro	up, Inc. PAC		00068710	
4 Date	5 Full name of contributor Out-of-state PAC (ID#	#:)	7 Amount of Contribution (\$)	
07/26/2024	Jeffries, Gretchen		5	\$25.00
	6 Contributor address; City; State; Zip Code			
	Columbus, OH 43235			
Princinal OCCL	upation / Job title (See Instructions)	9 Employer (See Instructions)	<u></u>	
Corporate C		Safelite Group Inc	<i>i)</i>	
		· · · · · · · · · · · · · · · · · · ·		
Date 08/02/2024	Full name of contributor out-of-state PAC (ID#	<i>t</i> :)	Amount of Contribution (\$)	ቀንፍ ባብ
08/02/2024	Jeffries, Gretchen			\$25.00
	Contributor address; City; State; Zip Code			
	Columbus, OH 43235			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3	
Corporate C		Safelite Group Inc	7	
Date	Full name of contributor Out-of-state PAC (ID#	· · · · · · · · · · · · · · · · · · ·	Amount of Contribution (\$)	
08/09/2024	Jeffries, Gretchen	۶۲		\$25.00
00,00,00	Contributor address; City; State; Zip Code			Ψ <u></u>
	Columbus, OH 43235			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	3)	
Corporate C	ounsel	Safelite Group Inc		
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
08/16/2024	Jeffries, Gretchen		9	\$25.00
	Contributor address; City; State; Zip Code			
	Columbus, OH 43235			
·	upation / Job title (See Instructions)	Employer (See Instructions)	;)	
Corporate C	T	Safelite Group Inc		
Date	Full name of contributor out-of-state PAC (ID#	¢:)	Amount of Contribution (\$)	
08/23/2024	Jeffries, Gretchen		5	\$25.00
	Contributor address; City; State; Zip Code			
Drizpinal appr	Columbus, OH 43235	Employer (Cool potructions		
	upation / Job title (See Instructions)	Employer (See Instructions)	<b>;</b> )	
Corporate C	ounsei	Safelite Group Inc		

SCHEDULE	A1
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	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 35/98 Rpt: 46/117	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Safelite Grou	up, Inc. PAC			00068710	
4		5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	08/30/2024	Jeffries, Gretchen				\$25.00
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Corporate Co	ounsel	Safelite Group Inc			
╞	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	09/06/2024	Jeffries, Gretchen			• •	\$25.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Corporate Co	ounsel	Safelite Group Inc			
╞	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	09/13/2024	Jeffries, Gretchen				\$25.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	Corporate Co	ounsel	Safelite Group Inc			
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	09/20/2024	Jeffries, Gretchen				\$25.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Corporate Co	ounsel	Safelite Group Inc			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/27/2024	Jeffries, Gretchen				\$25.00
		Contributor address; City; State; Zip Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		Columbus, OH 43235				
		apation / Job title (See Instructions)	Employer (See Instructions	;)		
	Corporate Co	ounsel	Safelite Group Inc			

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

The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 37/98 Rpt: 48/117	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	up, Inc. PAC		00068710	
4 Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
07/12/2024	Jurgensen, Paul			\$5.00
	6 Contributor address; City; State; Zip Code			
	Columbus, OH 43235			
-	upation / Job title (See Instructions)	9 Employer (See Instructions)	;)	
NAM		Safelite Autoglass, Inc.		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
07/19/2024	Jurgensen, Paul		\$	\$10.00
	Contributor address; City; State; Zip Code			
	Columbus, OH 43235			
	upation / Job title (See Instructions)	Employer (See Instructions	;)	
NAM		Safelite Autoglass, Inc.		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
07/05/2024	Kelley, Barbara		\$	\$25.00
	Contributor address; City; State; Zip Code			
	Columbus, OH 43235			
	upation / Job title (See Instructions)	Employer (See Instructions	i)	
AVP, People	e & Ldershp Dev	Safelite Autoglass, Inc.		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	_
07/12/2024	Kelley, Barbara		4	\$25.00
	Contributor address; City; State; Zip Code			
	Columbus OLI 42225			
Dringingloog	Columbus, OH 43235			
·	upation / Job title (See Instructions) e & Ldershp Dev	Employer (See Instructions Safelite Autoglass, Inc.	;)	
			1	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	·
07/19/2024	Kelley, Barbara		4	\$25.00
	Contributor address; City; State; Zip Code			
Drinsipal app	Columbus, OH 43235		<u></u>	
-	upation / Job title (See Instructions)	Employer (See Instructions	<b>;</b> )	
Ανη, μευριά	e & Ldershp Dev	Safelite Autoglass, Inc.		

	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 38/98 Rpt: 49/117	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	Jp, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	07/26/2024	Kelley, Barbara				\$25.00
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	AVP, People	e & Ldershp Dev	Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	08/02/2024	Kelley, Barbara				\$25.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	)		
	AVP, People	e & Ldershp Dev	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/09/2024	Kelley, Barbara				\$25.00
		Contributor address; City; State; Zip Code				
	21.1.1	Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	)		
		e & Ldershp Dev	Salellile Aulogiass, inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	±05.00
	08/16/2024	Kelley, Barbara				\$25.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
-	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
		e & Ldershp Dev	Safelite Autoglass, Inc.	9		
╞						
	Date 08/23/2024	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
	08/23/2024	Kelley, Barbara				Φ23.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
		e & Ldershp Dev	Safelite Autoglass, Inc.	,		
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 39/98 Rpt: 50/117	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	ıp, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	08/30/2024	Kelley, Barbara				\$25.00
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	AVP, People	& Ldershp Dev	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/06/2024	Kelley, Barbara				\$25.00
		Contributor address; City; State; Zip Code				
$\vdash$	Dringinglagou	Columbus, OH 43235				
		pation / Job title (See Instructions) & Ldershp Dev	Employer (See Instructions Safelite Autoglass, Inc.	5)		
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	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	¢25.00
	09/13/2024	Kelley, Barbara				\$25.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	AVP, People	& Ldershp Dev	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	09/20/2024	Kelley, Barbara				\$25.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	-	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	AVP, People	& Ldershp Dev	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/27/2024	Kelley, Barbara				\$25.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
		& Ldershp Dev	Safelite Autoglass, Inc.	·)		
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 40/98 Rpt: 51/117	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	ıp, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	10/04/2024	Kelley, Barbara				\$25.00
		6 Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	AVP, People	& Ldershp Dev	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	10/11/2024	Kelley, Barbara				\$25.00
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	AVP, People	& Ldershp Dev	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	10/18/2024	Kelley, Barbara				\$25.00
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	AVP, People	& Ldershp Dev	Safelite Autoglass, Inc.			
Γ	Date	Full name of contributor out-of-state PAC (ID#:_	)	T	Amount of Contribution (\$)	
	10/25/2024	Kelley, Barbara				\$25.00
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	AVP, People	& Ldershp Dev	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/05/2024	Korber, Karl				\$2.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Store Mgr - 0		Safelite Autoglass, Inc.			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 41/98 Rpt: 52/117	
2	FILER NAME			3	Filer ID (Ethics Commission F	Filers)
	Safelite Gro	up, Inc. PAC	ļ		00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	<del>_</del>	7	Amount of Contribution (\$)	
	07/12/2024	Korber, Karl				\$2.00
		6 Contributor address; City; State; Zip Code		1		·
		Contributor address, City, State, Zip Code				
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		Columbus, OH 43235				
8	Principal occu		9 Employer (See Instructions)	ـــــــــــــــــــــــــــــــــــــ		
	Store Mgr - (		Safelite Autoglass, Inc.	·)		
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	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>*</b> 2 00
	07/19/2024	Korber, Karl				\$2.00
		Contributor address; City; State; Zip Code				
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L		Columbus, OH 43235	]			
		upation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Store Mgr - (	СТU	Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	07/26/2024	Korber, Karl				\$2.00
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		Columbus, OH 43235	ļ			
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	ـــــــــــــــــــــــــــــــــــــ		
	Store Mgr - (		Safelite Autoglass, Inc.	,		
╞			<u> </u>	—	Amount of Contribution (\$)	
	Date		)		Amount of Contribution (\$)	ቀጋ በበ
	08/02/2024	Korber, Karl				\$2.00
		Contributor address; City; State; Zip Code	ļ			
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L		Columbus, OH 43235	]			
		upation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Store Mgr - 0		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/09/2024	Korber, Karl				\$2.00
		Contributor address; City; State; Zip Code				
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		Columbus, OH 43235	ļ			
$\vdash$	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	ເ ເ)		
	Store Mgr - (		Safelite Autoglass, Inc.	9		
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 42/98 Rpt: 53/117	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	ıp, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	08/16/2024	Korber, Karl				\$2.00
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Store Mgr - 0	сти	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	08/23/2024	Korber, Karl				\$2.00
		Contributor address; City; State; Zip Code				
		Columbus OL 1222E				
	Dringingl oppu	Columbus, OH 43235 pation / Job title (See Instructions)	Employer (Soo Instructions	<u> </u>		
	Store Mgr - 0		Employer (See Instructions Safelite Autoglass, Inc.	)		
				1		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>42 00</b>
	08/30/2024	Korber, Karl				\$2.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<b></b> ;)		
	Store Mgr - 0	CTU	Safelite Autoglass, Inc.			
F	Date	Full name of contributor 🔲 out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	09/06/2024	Korber, Karl				\$2.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	•	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Store Mgr - 0		Safelite Autoglass, Inc.			
Γ	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	09/13/2024	Korber, Karl				\$2.00
		Contributor address; City; State; Zip Code				
		Columbus OH 42225				
⊢	Dringinglaggy	Columbus, OH 43235	Employer (Cap Instructions			
	Store Mgr - 0	pation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	5)		
$\vdash$		,10				

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 43/98 Rpt: 54/117	
2	FILER NAME			3	Filer ID (Ethics Commission F	Filers)
	Safelite Gro	up, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	
	09/20/2024	Korber, Karl			.,	\$2.00
		6 Contributor address; City; State; Zip Code				
		Contributor address, City, State, Zip Code				
		Columbus, OH 43235				
8	Principal occu		9 Employer (See Instructions)	لــــــــــــــــــــــــــــــــــــ		
	Store Mgr - (		Safelite Autoglass, Inc.	,		
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	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>*</b> 2.00
	09/27/2024	Korber, Karl	]			\$2.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235	]			
		upation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Store Mgr - (		Safelite Autoglass, Inc.			
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)	Ē	Amount of Contribution (\$)	
	10/04/2024	Korber, Karl				\$2.00
		Contributor address; City; State; Zip Code				
		-				
		Columbus, OH 43235				
$\vdash$	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Store Mgr - (		Safelite Autoglass, Inc.			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	10/11/2024	Korber, Karl	,		Amount of Contraction (1)	\$2.00
						Ψ <b>-</b> ···-
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u>ا</u>		
	Store Mgr - (		Safelite Autoglass, Inc.	9 I		
F	Ū.		<u> </u>	—		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	. = 00
	10/18/2024					\$2.00
		Contributor address; City; State; Zip Code				
L		Columbus, OH 43235				
		upation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Store Mgr - 0	сти	Safelite Autoglass, Inc.			

SCHEDULE	A1
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	The Instruc	ction Guide explains how to complete this f	Total pages Schedule A1: Sch: 44/98 Rpt: 55/117			
2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
	Safelite Grou	Jp, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	10/25/2024	Korber, Karl			· · · · · · · · · · · · · · · · · · ·	\$2.00
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8	Principal occu	I pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> 5)		
	Store Mgr - 0		Safelite Autoglass, Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#:		Ι	Amount of Contribution (\$)	
	07/05/2024	Lo, Reuben	/		Allount of Contribution (+)	\$12.50
	01100,202	Contributor address; City; State; Zip Code				¥±=
		Cultinutur address, City, State, Zip Code				
		Columbus, OH 43235				
$\vdash$	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
		nolesale & Comm	Safelite Autoglass, Inc.			
╞	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)	
	07/12/2024	Lo, Reuben	/		, where it is a contract of (,	\$12.50
		· ·				
		Columbus, OH 43235				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	AVP GM Wh	nolesale & Comm	Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/19/2024	Lo, Reuben				\$12.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
Γ		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	AVP GM Wh	nolesale & Comm	Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/26/2024	Lo, Reuben				\$12.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	AVP GM Wh	nolesale & Comm	Safelite Autoglass, Inc.			

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 45/98 Rpt: 56/117	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	ıp, Inc. PAC			00068710	,
4	Date	5 Full name of contributor out-of-state PAC (ID#	:)	7	Amount of Contribution (\$)	
	08/02/2024	Lo, Reuben				\$12.50
		6 Contributor address; City; State; Zip Code		1		
Ļ	<u> </u>	Columbus, OH 43235		Ĺ		
8	•	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	AVP GM WI	olesale & Comm	Safelite Autoglass, Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	08/09/2024	Lo, Reuben				\$12.50
		Contributor address; City; State; Zip Code				
		Columbus OLI 42225				
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		pation / Job title (See Instructions) Iolesale & Comm	Employer (See Instructions Safelite Autoglass, Inc.	5)		
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	Date	—	:)		Amount of Contribution (\$)	±10 50
	08/16/2024					\$12.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
		iolesale & Comm	Safelite Autoglass, Inc.	,		
⊢	Date	Full name of contributor Out-of-state PAC (ID#	· )	Γ	Amount of Contribution (\$)	
	08/23/2024	Lo, Reuben	)			\$12.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	AVP GM Wh	olesale & Comm	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#	· :)		Amount of Contribution (\$)	
	08/30/2024	Lo, Reuben				\$12.50
		Contributor address; City; State; Zip Code				
L		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	AVP GM Wh	olesale & Comm	Safelite Autoglass, Inc.			
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	The Instrue	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 46/98 Rpt: 57/117	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	ıp, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	09/06/2024	Lo, Reuben				\$12.50
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8	Princinal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> ເ)		
ľ	-	olesale & Comm	Safelite Autoglass, Inc.	')		
╞	Date			<u> </u>	Amount of Contribution (\$)	
	09/13/2024	Full name of contributor out-of-state PAC (ID#: Lo, Reuben	)		Amount of Contribution (\$)	\$12.50
	03/13/2024					Ψ12.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<b>.</b> 5)		
	AVP GM Wh	olesale & Comm	Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/20/2024	Lo, Reuben				\$12.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235	I			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
		olesale & Comm	Safelite Autoglass, Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/27/2024	Lo, Reuben				\$12.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
		olesale & Comm	Safelite Autoglass, Inc.	,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	10/04/2024	Lo, Reuben	)			\$12.50
		Contributor address; City; State; Zip Code				
L		Columbus, OH 43235				
[ ]		pation / Job title (See Instructions)	Employer (See Instructions	5)		
L	AVP GM Wh	olesale & Comm	Safelite Autoglass, Inc.			

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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 47/98 Rpt: 58/117	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	up, Inc. PAC			00068710	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	10/11/2024	Lo, Reuben			· · · · · · · · · · · · · · · · · · ·	\$12.50
		6 Contributor address; City; State; Zip Code				
	I					
	I					
	l	Columbus, OH 43235				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u>ا</u> ن)		
	AVP GM Wh	holesale & Comm	Safelite Autoglass, Inc.			
╞	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	10/18/2024	Lo, Reuben				\$12.50
	I	Contributor address; City; State; Zip Code	,			
	I					
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	I	Columbus, OH 43235				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ل</u> ے (		
	AVP GM Wh	holesale & Comm	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	10/25/2024	Lo, Reuben				\$12.50
	1	Contributor address; City; State; Zip Code		1		
	I					
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		Columbus, OH 43235				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	AVP GM Wh	holesale & Comm	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/05/2024	Massa, Shawn				\$10.00
	I	Contributor address; City; State; Zip Code				
	I					
	I					
L		Columbus, OH 43235	-			
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
L	ASM		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	07/12/2024	Massa, Shawn				\$10.00
	I	Contributor address; City; State; Zip Code				
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L		Columbus, OH 43235	· · · · · · · ·	L		
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
L	ASM		Safelite Autoglass, Inc.			

SCHEDULE	A1
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	The Instruction Guide explains how to complete this form.			Total pages Schedule A1: Sch: 48/98 Rpt: 59/117		
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	up, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	07/19/2024	Massa, Shawn				\$10.00
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/26/2024	Massa, Shawn				\$10.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/02/2024	Massa, Shawn				\$10.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	-	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/09/2024	Massa, Shawn				\$10.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/16/2024	Massa, Shawn				\$10.00
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			
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SCHEDULE	A1
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	The Instruction Guide explains how to complete this form.			Total pages Schedule A1: Sch: 49/98 Rpt: 60/117		
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	Jp, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	08/23/2024	Massa, Shawn				\$10.00
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/30/2024	Massa, Shawn				\$10.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/06/2024	Massa, Shawn				\$10.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/13/2024	Massa, Shawn				\$10.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/20/2024	Massa, Shawn				\$10.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 50/98 Rpt: 61/117	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Safelite Grou				00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	09/27/2024	Massa, Shawn	!			\$10.00
	1	6 Contributor address; City; State; Zip Code		1		
	I		!			
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		Columbus, OH 43235		L		
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	10/04/2024	Massa, Shawn	!			\$10.00
l	1	Contributor address; City; State; Zip Code		1		
	I		!			
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L		Columbus, OH 43235				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	10/11/2024	Massa, Shawn	!			\$10.00
	1	Contributor address; City; State; Zip Code		1		
	I		!			
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		Columbus, OH 43235				
		upation / Job title (See Instructions)	Employer (See Instructions	3)		
	ASM		Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Ē	Amount of Contribution (\$)	
	10/18/2024	Massa, Shawn	!			\$10.00
	I	Contributor address; City; State; Zip Code		1		
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		Columbus, OH 43235				
ſ		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	10/25/2024	Massa, Shawn	!			\$10.00
	I	Contributor address; City; State; Zip Code		1		
	I		,			
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		Columbus, OH 43235				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			

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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 51/98 Rpt: 62/117	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Safelite Grou	up, Inc. PAC			00068710	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	07/05/2024	McAnally, Cheryl				\$25.00
		6 Contributor address; City; State; Zip Code		1		
	I					
	I					
		Columbus, OH 43235	•			
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	07/12/2024	McAnally, Cheryl				\$25.00
	I	Contributor address; City; State; Zip Code	1	1		
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		Columbus, OH 43235	1			
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	07/19/2024	McAnally, Cheryl				\$25.00
	I	Contributor address; City; State; Zip Code	ļ	]		
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	Duite single agen	Columbus, OH 43235		ŕ		
	Principal occu ASM	upation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	3)		
				—		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	±== 00
	07/26/2024	McAnally, Cheryl				\$25.00
	I	Contributor address; City; State; Zip Code				
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	I	Columbus, OH 43235				
$\vdash$	Principal occur	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	ASM	pation / Job title (See instructions)	Safelite Autoglass, Inc.	5)		
				<del></del>		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<u>ቀ</u> ጋር 00
	08/02/2024	McAnally, Cheryl				\$25.00
	I	Contributor address; City; State; Zip Code				
	I					
	I	Columbus, OH 43235				
$\vdash$	Principal occur	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	ASM		Safelite Autoglass, Inc.	"		
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 52/98 Rpt: 63/117	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Safelite Grou	up, Inc. PAC			00068710	
4	Date 08/09/2024	5 Full name of contributor out-of-state PAC (ID#: McAnally, Cheryl	)	7	Amount of Contribution (\$)	\$25.00
		6 Contributor address; City; State; Zip Code		ł		
		Columbus, OH 43235				
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	ASM	,	Safelite Autoglass, Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	08/16/2024	McAnally, Cheryl				\$25.00
	1			1		
	ļ	Columbus, OH 43235				
$\vdash$	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
	ASM		Safelite Autoglass, Inc.			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	08/23/2024	McAnally, Cheryl	/			\$25.00
	00/20/202			$\mathbf{I}$		ΨΕ0.00
	ļ	Continuation address, City, State, Zip Code				
	ļ	Columbus, OH 43235				
$\vdash$	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
	ASM		Safelite Autoglass, Inc.	''		
╞				—	Amount of Contribution (¢)	
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	ቀንፍ በበ
	08/30/2024	McAnally, Cheryl				\$25.00
	ļ	Contributor address; City; State; Zip Code				
	ļ					
		Columbus, OH 43235				
$\vdash$	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	ASM		Safelite Autoglass, Inc.	り		
			_			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	+05 00
	09/06/2024	McAnally, Cheryl				\$25.00
		Contributor address; City; State; Zip Code				
	ļ					
		Columbus, OH 43235				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			

The Instru	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 53/98 Rpt: 64/117		
2 FILER NAME			3	Filer ID (Ethics Commission	Filers)
Safelite Grou	up, Inc. PAC			00068710	
4 Date 09/13/2024	5 Full name of contributor out-of-state PAC (ID#: McAnally, Cheryl	)	7	Amount of Contribution (\$)	\$25.00
	6 Contributor address; City; State; Zip Code		•		
	Columbus, OH 43235				
	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
ASM		Safelite Autoglass, Inc.			
Date		)		Amount of Contribution (\$)	
09/20/2024	McAnally, Cheryl				\$25.00
	Contributor address; City; State; Zip Code		]		
	Columbus OH 1222E				
Dringinal occu	Columbus, OH 43235	Employer (See Instructions	<u> </u>		
Principal occu ASM	ipation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	5)		
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Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	Ф <u>Э</u> Б ОО
09/27/2024			•		\$25.00
	Contributor address; City; State; Zip Code				
	Columbus, OH 43235				
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u>і                                    </u>		
ASM		Safelite Autoglass, Inc.	-		
Date	Full name of contributor out-of-state PAC (ID#:	)	Ι	Amount of Contribution (\$)	
10/04/2024	McAnally, Cheryl				\$25.00
	Contributor address; City; State; Zip Code		ł		
	Columbus, OH 43235				
-	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
ASM		Safelite Autoglass, Inc.			
Date	Full name of contributor out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)	
10/11/2024	McAnally, Cheryl				\$25.00
	Contributor address; City; State; Zip Code		1		
	Columbus, OH 43235				
-	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
ASM		Safelite Autoglass, Inc.			

	The Instru	ction Guide explains how to complete	e this for	rm.	1	Total pages Schedule A1: Sch: 54/98 Rpt: 65/117	
2	FILER NAME				3	Filer ID (Ethics Commission	ı Filers)
	Safelite Grou	up, Inc. PAC				00068710	-
4	Date	5 Full name of contributor out-of-state PA	AC (ID#:	)	7	Amount of Contribution (\$)	
	10/18/2024	McAnally, Cheryl					\$25.00
		6 Contributor address; City; State; Zip Code					
	l	1					
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_		Columbus, OH 43235					
8		upation / Job title (See Instructions)	9	Employer (See Instructions     Safelite Autoglass, Inc.	5)		
	ASM	<del></del>	<u> </u>	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PA	AC (ID#:	)		Amount of Contribution (\$)	·
	10/25/2024						\$25.00
	l	Contributor address; City; State; Zip Code					
	I	1					
		Columbus, OH 43235					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	<u> </u> נו		
	ASM			Safelite Autoglass, Inc.	<i>י</i> י		
	Date	Full name of contributor Out-of-state PA		,	<b>I</b>	Amount of Contribution (\$)	
	07/05/2024	Full name of contributor out-of-state PA McCafferty, Keenan	AC (ID#:	)			\$1.00
		Contributor address; City; State; Zip Code					Ψ1.00
	I	Contributor address, City, State, Zip Code					
	l	1					
	l	Columbus, OH 43235					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	5)		
	District Mana	ager		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PA	AC (ID#:	)		Amount of Contribution (\$)	
	07/12/2024	McCafferty, Keenan					\$1.00
	I	Contributor address; City; State; Zip Code					
	l	1					
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		Columbus, OH 43235			Ĺ		
		upation / Job title (See Instructions)		Employer (See Instructions	5)		
	District Mana		<u> </u>	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PA	AC (ID#:	)		Amount of Contribution (\$)	÷4.00
	07/19/2024	McCafferty, Keenan					\$1.00
	l	Contributor address; City; State; Zip Code					
	I	1					
	l	Columbus, OH 43235					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	<u> </u> :)		
	District Mana			Safelite Autoglass, Inc.	<i>,</i>		
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	The Instruc	ction Guide explains how to complete t	1	Total pages Schedule A1: Sch: 55/98 Rpt: 66/117		
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	лр, Inc. PAC			00068710	-
4	Date	5 Full name of contributor out-of-state PAC	.C (ID#:)	7	Amount of Contribution (\$)	
	07/26/2024	McCafferty, Keenan				\$1.00
		6 Contributor address; City; State; Zip Code		"		
Ļ	Drive sized energy	Columbus, OH 43235				
8	Principal occu District Mana	pation / Job title (See Instructions)	9 Employer (See Instruction: Safelite Autoglass, Inc.			
				-		
	Date		.C (ID#:)		Amount of Contribution (\$)	<b>#1 00</b>
	08/02/2024					\$1.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	I)		
	District Mana		Safelite Autoglass, Inc.			
╞	Date	Full name of contributor Out-of-state PAG	I .C (ID#:)	Т	Amount of Contribution (\$)	
	08/09/2024	McCafferty, Keenan			•••	\$1.00
		Contributor address; City; State; Zip Code		•		
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions			
	District Mana	ເger	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC	.C (ID#:)	T	Amount of Contribution (\$)	
	08/16/2024	McCafferty, Keenan				\$1.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	<u> </u>		
	District Mana		Safelite Autoglass, Inc.			
╞	Date	Full name of contributor out-of-state PAC		Т	Amount of Contribution (\$)	
	08/23/2024	McCafferty, Keenan	C (ID#)		Allount of Contribution (4)	\$1.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instruction			
	District Mana	ager	Safelite Autoglass, Inc.			

The	The Instruction Guide explains how to complete this form.					1 Total pages Schedule A1: Sch: 56/98 Rpt: 67/117		
2 FILE	RNAME				3	Filer ID (Ethics Commission	Filers)	
Safe	elite Grou	ıp, Inc. PAC				00068710	-	
4 Date	;	5 Full name of contributor out-of	f-state PAC (ID#:	)	7	Amount of Contribution (\$)		
08/3	30/2024	McCafferty, Keenan					\$1.00	
		6 Contributor address; City; State; Zip C	Code					
		Columbus, OH 43235						
		pation / Job title (See Instructions)	9	Employer (See Instructions	;)			
Disti	rict Mana	.ger		Safelite Autoglass, Inc.				
Date			f-state PAC (ID#:	)		Amount of Contribution (\$)		
09/0	6/2024	McCafferty, Keenan					\$1.00	
		Contributor address; City; State; Zip C						
		Columbus, OH 43235						
Drinc		pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>			
	rict Mana			Safelite Autoglass, Inc.	9			
				\		Amount of Contribution (\$)		
Date	3/2024	McCafferty, Keenan	f-state PAC (ID#:	)		Amount of Contribution (\$)	\$1.00	
0311	-3/2024		`ode				Φ1.00	
		Contributor address; City; State; Zip C	Joue					
		Columbus, OH 43235						
Princ	cipal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			
Dist	rict Mana	ger		Safelite Autoglass, Inc.				
Date	;	Full name of contributor	f-state PAC (ID#:	)		Amount of Contribution (\$)		
09/2	20/2024	McCafferty, Keenan					\$1.00	
		Contributor address; City; State; Zip C	Code					
		Columbus, OH 43235		(2				
	cipal occup rict Mana	pation / Job title (See Instructions)		Employer (See Instructions	5)			
				Safelite Autoglass, Inc.				
Date			f-state PAC (ID#:	)		Amount of Contribution (\$)	<b>\$1 00</b>	
09/2	27/2024	McCafferty, Keenan					\$1.00	
		Contributor address; City; State; Zip C	Code					
		Columbus, OH 43235						
Princ	cipal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)			
	rict Mana			Safelite Autoglass, Inc.	,			
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 57/98 Rpt: 68/117	
2	FILER NAME			3	Filer ID (Ethics Commission	r Filers)
	Safelite Grou				00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#	:)	7	Amount of Contribution (\$)	
	10/04/2024	McCafferty, Keenan				\$1.00
	ļ	6 Contributor address; City; State; Zip Code		1		
	ļ					
Ļ	Dringing oog	Columbus, OH 43235	Contructions	<u> </u>		
8	District Mana	ipation / Job title (See Instructions)	9 Employer (See Instructions Safelite Autoglass, Inc.	5)		
				1		
	Date	Full name of contributor out-of-state PAC (ID#	ť:)		Amount of Contribution (\$)	<b>#1 00</b>
	10/11/2024					\$1.00
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	ļ	Columbus, OH 43235				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ج)		
	District Mana		Safelite Autoglass, Inc.	-,		
╞─	Date	Full name of contributor out-of-state PAC (ID#		Γ	Amount of Contribution (\$)	
	10/18/2024	McCafferty, Keenan	/		Allount of Contribution (+)	\$1.00
	10,111	Contributor address; City; State; Zip Code		ł		*=
		Columbus, OH 43235				
	-	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.			
	Date	Full name of contributor Out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	10/25/2024	McCafferty, Keenan				\$1.00
	ļ	Contributor address; City; State; Zip Code		1		
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	Dringing occu	Columbus, OH 43235		<u> </u>		
	District Mana	ipation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	5)		
╞				<del></del>		
	Date 07/05/2024	Full name of contributor out-of-state PAC (ID#	·)		Amount of Contribution (\$)	\$25.00
	07/05/2024	McDonald, Malcolm		-		Φ <u>2</u> 3.00
	1	Contributor address; City; State; Zip Code				
	ļ					
	1	Columbus, OH 43235				
⊢	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	1 5)		
	NAM		Safelite Autoglass, Inc.			
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The Instr	ruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 58/98 Rpt: 69/117
2 FILER NAM	E		<b>3</b> Filer ID (Ethics Commission Filers)
	roup, Inc. PAC		00068710
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
07/12/2024	4 McDonald, Malcolm		\$25.00
	6 Contributor address; City; State; Zip Code		
C. D. Laboration	Columbus, OH 43235		
	cupation / Job title (See Instructions)	9 Employer (See Instructions	3)
NAM		Safelite Autoglass, Inc.	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
07/19/2024	4 McDonald, Malcolm		\$25.00
	Contributor address; City; State; Zip Code		
	Columbus, OH 43235	· · · · · · · · ·	-
	cupation / Job title (See Instructions)	Employer (See Instructions	3)
NAM		Safelite Autoglass, Inc.	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
07/26/2024	4 McDonald, Malcolm		\$25.00
	Contributor address; City; State; Zip Code		
Drivelas	Columbus, OH 43235		、 、
Principal oc NAM	cupation / Job title (See Instructions)	Employer (See Instructions	S)
		Safelite Autoglass, Inc.	F
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
08/02/2024	· · · · · · · · · · · · · · · · · · ·		\$25.00
	Contributor address; City; State; Zip Code		
	Columbus OL 1222E		
Drincipal oc	Columbus, OH 43235	Employer (See Instructions	
Principal oc NAM	cupation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	5)
		Salellie Aulogiass, inc.	F
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
08/16/2024			\$50.00
	Contributor address; City; State; Zip Code		
Drineirel ee	Columbus, OH 43235		<u> </u>
	cupation / Job title (See Instructions)	Employer (See Instructions	5)
NAM		Safelite Autoglass, Inc.	

SCHEDULE	A1
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	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1:	
L					Sch: 59/98 Rpt: 70/117	`
2	FILER NAME	Safelite Group, Inc. PAC			Filer ID (Ethics Commission	⊢ılers)
					00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	07/05/2024	McGowan, Darrin				\$7.50
		6 Contributor address; City; State; Zip Code				
Ļ	Dringinglassy	Columbus, OH 43235				
8	ASM	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	ASIVI		Safelite Autoglass, Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/12/2024	McGowan, Darrin				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus OLI 42225				
⊢	Dringing age	Columbus, OH 43235	Employer (Cool Instructions			
	ASM	pation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	5)		
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	Date	—	)		Amount of Contribution (\$)	<b>*7 5 0</b>
	07/19/2024	McGowan, Darrin				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	ASM		Safelite Autoglass, Inc.	,		
⊢	Date	Full name of contributor Out-of-state PAC (ID#:			Amount of Contribution (\$)	
	07/26/2024		)		Amount of Contribution (\$)	\$7.50
	0112012024	McGowan, Darrin				Φ1.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> چ)		
	ASM		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/02/2024	McGowan, Darrin	)			\$7.50
	Contributor address; City; State; Zip Code					
1		Columbus, OH 43235				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
l	ASM		Safelite Autoglass, Inc.			
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	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 60/98 Rpt: 71/117		
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	up, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	08/09/2024	McGowan, Darrin				\$7.50
	I	6 Contributor address; City; State; Zip Code		1		
	I					
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Ļ		Columbus, OH 43235	1 <u>.</u>			
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	ASM		Safelite Autoglass, Inc.	—		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/16/2024	McGowan, Darrin				\$7.50
	I	Contributor address; City; State; Zip Code				
	I					
		Columbus, OH 43235				
$\vdash$	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions			
	ASM		Safelite Autoglass, Inc.	ッ		
╞	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	Date 08/23/2024	Full name of contributor out-of-state PAC (ID#: McGowan, Darrin			Amount of Contribution (\$)	\$7.50
	001201202 .	Contributor address; City; State; Zip Code				Ψ1.00
	I	Continuation address, City, State, Lip Code				
	I					
	l	Columbus, OH 43235				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	ASM	1	Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	08/30/2024	McGowan, Darrin				\$7.50
	I	Contributor address; City; State; Zip Code				
	l					
	I					
		Columbus, OH 43235				
	•	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	09/06/2024	McGowan, Darrin				\$7.50
	l	Contributor address; City; State; Zip Code				
	I					
	l	Columbus, OH 43235				
$\vdash$	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	$\sum_{i=1}^{n}$		
	ASM		Safelite Autoglass, Inc.	<i>.</i> )		
$\vdash$			Salente Autograss, mo.			

	The Instru	ction Guide explains how to complete this f	1	1 Total pages Schedule A1: Sch: 61/98 Rpt: 72/117		
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	up, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	09/13/2024	McGowan, Darrin				\$7.50
	1	6 Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/20/2024	McGowan, Darrin				\$7.50
	ļ	Contributor address; City; State; Zip Code		1		
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	ļ					
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	;)		
	ASM		Safelite Autoglass, Inc.			
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	09/27/2024	McGowan, Darrin				\$7.50
	ļ	Contributor address; City; State; Zip Code		1		
	ļ					
		Columbus, OH 43235				
		ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	ASM		Safelite Autoglass, Inc.	_		
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	10/04/2024	McGowan, Darrin				\$7.50
	ļ	Contributor address; City; State; Zip Code		1		
	ļ					
		Columbus, OH 43235	<u> </u>	Ļ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	10/11/2024	McGowan, Darrin				\$7.50
		Contributor address; City; State; Zip Code				
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		Columbus, OH 43235	1 <u>.</u>	Ļ		
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
	ASM		Safelite Autoglass, Inc.			

	The Instrue	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 62/98 Rpt: 73/117	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	ıp, Inc. PAC			00068710	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	10/18/2024	McGowan, Darrin				\$7.50
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	ASM		Safelite Autoglass, Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/25/2024	McGowan, Darrin	/			\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<b></b> ;)		
	ASM		Safelite Autoglass, Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/05/2024	Nickerauer, Amiee	,			\$7.50
	0.,00	Contributor address; City; State; Zip Code				<b>**</b> .
		Contributor address, City, State, Zip Code				
		Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions			
	Regional VP		Safelite Autoglass, Inc.			
	Date	Full name of contributor Out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/12/2024	Nickerauer, Amiee	/			\$7.50
		Contributor address; City; State; Zip Code				<b></b>
		Contributor address, City, State, Zip Code				
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions			
	Regional VP		Safelite Autoglass, Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/19/2024	Nickerauer, Amiee	/		(1)	\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions			
	Regional VP		Safelite Autoglass, Inc.			
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	The Instrue	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 63/98 Rpt: 74/117	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	ıp, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	07/26/2024	Nickerauer, Amiee				\$7.50
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8			9 Employer (See Instructions	)		
	Regional VP		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/02/2024	Nickerauer, Amiee				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	)		
	Regional VP		Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/09/2024	Nickerauer, Amiee				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	•	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Regional VP		Safelite Autoglass, Inc.			
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/16/2024	Nickerauer, Amiee				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	•	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Regional VP		Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/23/2024	Nickerauer, Amiee				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	)		
	Regional VP		Safelite Autoglass, Inc.			

	The Instrue	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 64/98 Rpt: 75/117	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	ıp, Inc. PAC			00068710	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	08/30/2024	Nickerauer, Amiee				\$7.50
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Regional VP		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/06/2024	Nickerauer, Amiee				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Regional VP		Safelite Autoglass, Inc.			
╞	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/13/2024	Nickerauer, Amiee				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Regional VP		Safelite Autoglass, Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/20/2024	Nickerauer, Amiee				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions			
	Regional VP		Safelite Autoglass, Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/27/2024	Nickerauer, Amiee				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Regional VP		Safelite Autoglass, Inc.			
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	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 65/98 Rpt: 76/117	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Safelite Grou	Jp, Inc. PAC			00068710	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	10/04/2024	Nickerauer, Amiee				\$7.50
	I	6 Contributor address; City; State; Zip Code		1		
	I					
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Ļ		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Regional VP		Safelite Autoglass, Inc.	-		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	_
	10/11/2024			]		\$7.50
	Contributor address; City; State; Zip Code					
	I	Columbus, OH 43235				
┝	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Regional VP		Safelite Autoglass, Inc.	5)		
╞	-			Т	Amount of Contribution (\$)	
	Date 10/18/2024	Full name of contributor out-of-state PAC (ID#: Nickerauer, Amiee	)		Amount of Contribution (\$)	\$7.50
	10/10/2024			-		Ψ1.50
	l	Contributor address; City; State; Zip Code				
	l					
	I	Columbus, OH 43235				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Regional VP		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	10/25/2024	Nickerauer, Amiee				\$7.50
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Regional VP		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/05/2024	OMara, Brian				\$50.00
	I	Contributor address; City; State; Zip Code				
	I					
	I	Columbus, OH 43235				
$\vdash$	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	VP Client Se		Safelite Autoglass, Inc.	5)		
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	The Instrue	ction Guide explains how to complete	e this fo	rm.	1	Total pages Schedule A1: Sch: 66/98 Rpt: 77/117	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	ıp, Inc. PAC				00068710	
4	Date	5 Full name of contributor out-of-state P	PAC (ID#:	)	7	Amount of Contribution (\$)	
	07/12/2024	OMara, Brian					\$50.00
		6 Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	VP Client Se	rv Delivery		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state F	PAC (ID#:	)		Amount of Contribution (\$)	
	07/19/2024	OMara, Brian					\$50.00
	Contributor address; City; State; Zip Code						
		Columbus, OH 43235					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	VP Client Se			Safelite Autoglass, Inc.	<i>•</i> )		
⊨				、 、		Amount of Contribution (\$)	
	Date 07/26/2024	Full name of contributor out-of-state F OMara, Brian	AC (ID#:	)		Amount of Contribution (\$)	\$50.00
	0112012024	Contributor address; City; State; Zip Code					\$30.00
		Contributor address, City, State, Zip Code					
		Columbus, OH 43235					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	VP Client Se	rv Delivery		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state F	PAC (ID#:	)		Amount of Contribution (\$)	
	08/02/2024	OMara, Brian					\$50.00
		Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	VP Client Se			Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state F	PAC (ID#:	)		Amount of Contribution (\$)	<b>*=0 0 0</b>
	08/09/2024	OMara, Brian					\$50.00
		Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	L;)		
	VP Client Se			Safelite Autoglass, Inc.	,		
⊢				<b>~</b>			

	The Instrue	ction Guide explains how to complete	e this fo	rm.	1	Total pages Schedule A1: Sch: 67/98 Rpt: 78/117	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	ıp, Inc. PAC				00068710	
4	Date	5 Full name of contributor out-of-state P	AC (ID#:	)	7	Amount of Contribution (\$)	
	08/16/2024	OMara, Brian					\$50.00
		6 Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
8		pation / Job title (See Instructions)	ę	Employer (See Instructions	5)		
	VP Client Se	rv Delivery		Safelite Autoglass, Inc.			
	Date	Full name of contributor 🔲 out-of-state P	AC (ID#:	)		Amount of Contribution (\$)	
	08/23/2024	OMara, Brian					\$50.00
	Contributor address; City; State; Zip Code						
		Columbus, OH 43235					
-	Princinal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> נו		
	VP Client Se			Safelite Autoglass, Inc.	''		
╞	Date	Full name of contributor Out-of-state P		)		Amount of Contribution (\$)	
	08/30/2024	OMara, Brian	AC (ID#	)			\$50.00
	00/00/2024	Contributor address; City; State; Zip Code					\$00.00
		Columbus, OH 43235					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	VP Client Se	rv Delivery		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state P	AC (ID#:	)		Amount of Contribution (\$)	
	09/06/2024	OMara, Brian					\$50.00
		Contributor address; City; State; Zip Code					
		Columbus OII 42225					
⊢	Dringingloggy	Columbus, OH 43235	r	Employer (Cap Instructions			
	VP Client Se	pation / Job title (See Instructions)		Employer (See Instructions Safelite Autoglass, Inc.	)		
╞				Salente / latogiass, inc.	-		
	Date 09/13/2024	Full name of contributor 🛛 out-of-state P OMara, Brian	AC (ID#:	)		Amount of Contribution (\$)	\$50.00
	09/13/2024						\$50.00
		Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
$\vdash$	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	VP Client Se			Safelite Autoglass, Inc.			
$\vdash$							
I							

	The Instru	ction Guide explains how to complete	this fo	rm.	1	Total pages Schedule A1: Sch: 68/98 Rpt: 79/117	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	ıp, Inc. PAC				00068710	
4	Date	5 Full name of contributor out-of-state PA	AC (ID#:	)	7	Amount of Contribution (\$)	
	09/20/2024	OMara, Brian					\$50.00
		6 Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
8		pation / Job title (See Instructions)	g	Employer (See Instructions	5)		
	VP Client Se	rv Delivery		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PA	AC (ID#:	)		Amount of Contribution (\$)	
	09/27/2024	OMara, Brian					\$50.00
	Contributor address; City; State; Zip Code						
		Columbus OL 42225					
⊢	Dringing ago	Columbus, OH 43235		Employer (Cap Instructions			
	VP Client Se	pation / Job title (See Instructions)		Employer (See Instructions Safelite Autoglass, Inc.	5)		
╞				Salente / latogiass, inc.	-		
	Date	Full name of contributor out-of-state PA	AC (ID#:	)		Amount of Contribution (\$)	¢ΕΟ ΟΟ
	10/04/2024	OMara, Brian					\$50.00
		Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	VP Client Se	rv Delivery		Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PA	AC (ID#:	)		Amount of Contribution (\$)	
	10/11/2024	OMara, Brian					\$50.00
		Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	VP Client Se			Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PA	AC (ID#:	)		Amount of Contribution (\$)	
	10/18/2024	OMara, Brian					\$50.00
		Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	VP Client Se			Safelite Autoglass, Inc.	'		
⊢				···· • • ··· •			

	The Instrue	ction Guide explains how to complete	this fo	rm.	1	Total pages Schedule A1: Sch: 69/98 Rpt: 80/117	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	ıp, Inc. PAC				00068710	
4	Date	5 Full name of contributor Out-of-state PA	C (ID#:	)	7	Amount of Contribution (\$)	
	10/25/2024	OMara, Brian					\$50.00
		6 Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	VP Client Se	rv Delivery		Safelite Autoglass, Inc.			
	Date	Full name of contributor 🛛 out-of-state PA	C (ID#:	)		Amount of Contribution (\$)	
	07/05/2024	Oshida, Kenichi					\$7.50
	Contributor address; City; State; Zip Code						
		Columbus, OH 43235					
	-	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Claim Invgt &	& CmpInce Mgr		Safelite Autoglass, Inc.			
	Date	Full name of contributor 🛛 out-of-state PA	C (ID#:	)		Amount of Contribution (\$)	
	07/12/2024	Oshida, Kenichi					\$7.50
		Contributor address; City; State; Zip Code			1		
		Columbus, OH 43235			Ļ		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Claim invgi a	& CmpInce Mgr		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PA	C (ID#:	)		Amount of Contribution (\$)	
	07/19/2024	Oshida, Kenichi					\$7.50
		Contributor address; City; State; Zip Code					
		Columbus OL 12225					
⊢	Dringinglaggy	Columbus, OH 43235					
	-	pation / Job title (See Instructions) & CmpInce Mgr		Employer (See Instructions Safelite Autoglass, Inc.	5)		
	Claim mygt d						
	Date	Full name of contributor Out-of-state PA	C (ID#:	)		Amount of Contribution (\$)	<b>*7 5 0</b>
	07/26/2024	Oshida, Kenichi					\$7.50
		Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
⊢	Principal occu	pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	<u>ا</u>		
		Cmplnce Mgr		Employer (See Instructions Safelite Autoglass, Inc.	<i>י</i> ו		
⊢	Siann nivyt c			Juliano Autogiaso, int.			

	The Instruc	ction Guide explains how to comple	ete this for	rm.	1	Total pages Schedule A1: Sch: 70/98 Rpt: 81/117	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	Jp, Inc. PAC			,	00068710	
4	Date	5 Full name of contributor out-of-state	e PAC (ID#:	)	7	Amount of Contribution (\$)	
	08/02/2024	Oshida, Kenichi					\$7.50
		6 Contributor address; City; State; Zip Code					
Ļ		Columbus, OH 43235		(2			
8	•	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
		& Cmplnce Mgr	l	Safelite Autoglass, Inc.			
	Date	_	e PAC (ID#:	)		Amount of Contribution (\$)	÷= =0
	08/09/2024	Oshida, Kenichi					\$7.50
	Contributor address; City; State; Zip Code						
$\vdash$	Dringingl oppu	Columbus, OH 43235	— – – – – –	Employer (Coo Instructions			
	-	pation / Job title (See Instructions) & CmpInce Mgr		Employer (See Instructions Safelite Autoglass, Inc.	9		
$\vdash$			I	Salelile Autogiuss, inc.			
	Date		e PAC (ID#:	)		Amount of Contribution (\$)	<b>*</b> 7 го
	08/16/2024	Oshida, Kenichi					\$7.50
		Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
$\vdash$	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
		& Cmplnce Mgr		Safelite Autoglass, Inc.	,		
⊢	Date	Full name of contributor out-of-state		)		Amount of Contribution (\$)	
	08/23/2024	Oshida, Kenichi	· FAC (ID.,			Allount of Contribution (+)	\$7.50
	00,20,20	Contributor address; City; State; Zip Code					Ŧ
		Columbus, OH 43235					
$\vdash$	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Claim Invgt &	& CmpInce Mgr		Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state	e PAC (ID#:	)		Amount of Contribution (\$)	
	08/30/2024	Oshida, Kenichi					\$7.50
		Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
		pation / Job title (See Instructions)		Employer (See Instructions	)		
	Claim Invgt &	& CmpInce Mgr		Safelite Autoglass, Inc.			
1							

	The Instrue	ction Guide explains how to complete t	this form.	1	Total pages Schedule A1: Sch: 71/98 Rpt: 82/117	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	ıp, Inc. PAC			00068710	-
4	Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7	Amount of Contribution (\$)	
	09/06/2024	Oshida, Kenichi				\$7.50
		6 Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Claim Invgt &	& CmpInce Mgr	Safelite Autoglass, Inc.			
	Date	Full name of contributor 🛛 out-of-state PAC	C (ID#:)	Γ	Amount of Contribution (\$)	
	09/13/2024	Oshida, Kenichi				\$7.50
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Claim Invgt &	& CmpInce Mgr	Safelite Autoglass, Inc.			
	Date	Full name of contributor 🛛 out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	
	09/20/2024	Oshida, Kenichi				\$7.50
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
	•	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Claim Invgt &	& Cmplnce Mgr	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	
	09/27/2024	Oshida, Kenichi				\$7.50
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235	i			
	•	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Claim Invgt &	& CmpInce Mgr	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	
	10/04/2024	Oshida, Kenichi				\$7.50
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Claim Invgt &	& CmpInce Mgr	Safelite Autoglass, Inc.			
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	The Instruc	ction Guide explains how to com	plete this for	m.	1	Total pages Schedule A1: Sch: 72/98 Rpt: 83/117	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	ıp, Inc. PAC				00068710	ŕ
4	Date	5 Full name of contributor out-of-	state PAC (ID#:	)	7	Amount of Contribution (\$)	
	10/11/2024	Oshida, Kenichi					\$7.50
		6 Contributor address; City; State; Zip C	ode				
		Columbus, OH 43235					
8	-	pation / Job title (See Instructions)	9	Employer (See Instructions	)		
	Claim Invgt &	& CmpInce Mgr		Safelite Autoglass, Inc.			
	Date		state PAC (ID#:	)		Amount of Contribution (\$)	
	10/18/2024	Oshida, Kenichi					\$7.50
	Contributor address; City; State; Zip Code						
		Columbus OLI 42225					
⊢	Drineirelessu	Columbus, OH 43235	i				
		pation / Job title (See Instructions) & CmpInce Mgr		Employer (See Instructions Safelite Autoglass, Inc.	)		
	Date		state PAC (ID#:	)		Amount of Contribution (\$)	<b>#7 50</b>
	10/25/2024	Oshida, Kenichi					\$7.50
		Contributor address; City; State; Zip C	ode				
		Columbus, OH 43235					
⊢	Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions	)		
	Claim Invgt &	& Cmplnce Mgr		Safelite Autoglass, Inc.			
╞	Date	Full name of contributor	state PAC (ID#:	)		Amount of Contribution (\$)	
	07/05/2024	Overbaugh, Donald	·				\$5.00
		Contributor address; City; State; Zip C	ode				
		Columbus, OH 43235					
		pation / Job title (See Instructions)		Employer (See Instructions	)		
	District Mana	iger		Safelite Autoglass, Inc.			
	Date	Full name of contributor 🛛 out-of-	state PAC (ID#:	)		Amount of Contribution (\$)	
	07/12/2024	Overbaugh, Donald					\$5.00
		Contributor address; City; State; Zip C	ode				
⊢	Deire i i	Columbus, OH 43235					
		pation / Job title (See Instructions)		Employer (See Instructions	)		
⊢	District Mana	ເບຼະ 		Safelite Autoglass, Inc.			

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 73/98 Rpt: 84/117	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers	s)
	up, Inc. PAC		00068710	
4 Date	5 Full name of contributor Out-of-state PAC (ID#	:)	7 Amount of Contribution (\$)	
07/19/2024	Overbaugh, Donald		\$	5.00
	6 Contributor address; City; State; Zip Code			
	Columbus, OH 43235			
8 Principal occu	I upation / Job title (See Instructions)	9 Employer (See Instructions)	)	
District Mana		Safelite Autoglass, Inc.	, ,	
Date	Full name of contributor Out-of-state PAC (ID#	: )	Amount of Contribution (\$)	
07/05/2024	Paskvan, Kathy			57.50
	Columbus, OH 43235			
•	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Claims Mana	agement Dir	Safelite Autoglass, Inc.		
Date	Date Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
07/12/2024	Paskvan, Kathy		\$	67.50
	Contributor address; City; State; Zip Code			
	Columbus, OH 43235			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	)	
Claims Man		Safelite Autoglass, Inc.	)	
Date	Full name of contributor Out-of-state PAC (ID#		Amount of Contribution (\$)	
07/19/2024	Paskvan, Kathy	/		67.50
011101202.	Contributor address; City; State; Zip Code		Ŧ	1.00
	Continuation address, only, State, Zip Code			
	Columbus, OH 43235			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	)	
Claims Mana	agement Dir	Safelite Autoglass, Inc.		
Date	Full name of contributor out-of-state PAC (ID#	:)	Amount of Contribution (\$)	
07/26/2024	Paskvan, Kathy		\$	67.50
	Contributor address; City; State; Zip Code			
	Columbus, OH 43235		-	
-	Ipation / Job title (See Instructions)	Employer (See Instructions)	)	
Claims Man	agement Dir	Safelite Autoglass, Inc.		

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 74/98 Rpt: 85/117	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	ıp, Inc. PAC			00068710	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	08/02/2024	Paskvan, Kathy				\$7.50
		6 Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235	-			
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Claims Mana		Safelite Autoglass, Inc.	-		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/09/2024	Paskvan, Kathy				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
$\vdash$	Dringingl occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Claims Mana		Safelite Autoglass, Inc.	5)		
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	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<u> ተ</u> ረጉ በ
	08/16/2024	Paskvan, Kathy				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Claims Mana	agement Dir	Safelite Autoglass, Inc.			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	08/23/2024	Paskvan, Kathy				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Claims Mana	agement Dir	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/30/2024	Paskvan, Kathy				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Claims Mana	agement Dir	Safelite Autoglass, Inc.			

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 75/98 Rpt: 86/117	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	ıp, Inc. PAC			00068710	ŕ
4	Date	5 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	
	09/06/2024	Paskvan, Kathy				\$7.50
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Claims Mana	agement Dir	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	· :)		Amount of Contribution (\$)	
	09/13/2024	Paskvan, Kathy				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Claims Mana	agement Dir	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/20/2024	Paskvan, Kathy				\$7.50
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Claims Mana	agement Dir	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/27/2024	Paskvan, Kathy				\$7.50
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
	•	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Claims Mana	agement Dir	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/04/2024	Paskvan, Kathy				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Claims Mana	agement Dir	Safelite Autoglass, Inc.			
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	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 76/98 Rpt: 87/117	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	Jp, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	10/11/2024	Paskvan, Kathy				\$7.50
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Claims Mana	agement Dir	Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/18/2024	Paskvan, Kathy				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Claims Mana	agement Dir	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/25/2024	Paskvan, Kathy				\$7.50
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235	 			
	-	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Claims Mana		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/05/2024	Paul, Nathan				\$5.00
		Contributor address; City; State; Zip Code		]		
	Drive sized oppu	Columbus, OH 43235		Ĺ		
	Principal occu District Mana	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			Safelite Autoglass, Inc.	-		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/12/2024	Paul, Nathan				\$5.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
L	Dringingl occu		Employer (See Instructions	<u> </u>		
	District Mana	pation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	5)		
		igei	שמוכוונה העוטטועשט, וויס.			

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

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 78/98 Rpt: 89/117	
2	FILER NAME			3	Filer ID (Ethics Commission	r Filers)
	Safelite Grou	ıp, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#	)	7	Amount of Contribution (\$)	
	08/02/2024	Ramsdell, Eric				\$5.50
		6 Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	NAM - Fleet		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#	)		Amount of Contribution (\$)	
	08/09/2024	Ramsdell, Eric				\$5.50
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	NAM - Fleet		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#	)		Amount of Contribution (\$)	
	08/16/2024	Ramsdell, Eric				\$5.50
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	NAM - Fleet		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#	)	Γ	Amount of Contribution (\$)	
	08/23/2024	Ramsdell, Eric				\$5.50
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	NAM - Fleet		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#	)	Γ	Amount of Contribution (\$)	
	08/30/2024	Ramsdell, Eric				\$5.50
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	NAM - Fleet		Safelite Autoglass, Inc.			
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The Inst	ruction Guide explains how to complete this f	form.	1 I	Total pages Schedule A1: Sch: 79/98 Rpt: 90/117	
2 FILER NAM	1E		3	Filer ID (Ethics Commission	Filers)
Safelite G	roup, Inc. PAC		1	00068710	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
09/06/202					\$5.50
	6 Contributor address; City; State; Zip Code		1		
	Columbus, OH 43235		->		
8 Principal of NAM - Fle	ccupation / Job title (See Instructions)	9 Employer (See Instructions Safelite Autoglass, Inc.	S)		
			1		
Date	— — —	)		Amount of Contribution (\$)	
09/13/202	·				\$5.50
	Contributor address; City; State; Zip Code				
	Columbus, OH 43235				
Principal of	ccupation / Job title (See Instructions)	Employer (See Instructions	<u>г</u> S)		
NAM - Fle	et	Safelite Autoglass, Inc.			
Date	Full name of contributor out-of-state PAC (ID#:_	)	Ι	Amount of Contribution (\$)	
09/20/202					\$5.50
	Contributor address; City; State; Zip Code		1		
	Columbus, OH 43235		Ļ		
Principal of NAM - Fle	ccupation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	5)		
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Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
09/27/202	·				\$5.50
	Contributor address; City; State; Zip Code				
	Columbus, OH 43235				
Principal of	ccupation / Job title (See Instructions)	Employer (See Instructions	5)		
NAM - Fle	et	Safelite Autoglass, Inc.			
Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
10/04/202	4 Ramsdell, Eric				\$5.50
	Contributor address; City; State; Zip Code		1		
Dissingly	Columbus, OH 43235		Ĺ		
Principal of NAM - Fle	ccupation / Job title (See Instructions)	Employer (See Instructions	S)		
	el	Safelite Autoglass, Inc.			

	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 80/98 Rpt: 91/117	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	Jp, Inc. PAC			00068710	
4	Date	5 Full name of contributor Dut-of-state PAC (ID	)#:)	7	Amount of Contribution (\$)	
	10/11/2024	Ramsdell, Eric				\$5.50
		6 Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	NAM - Fleet		Safelite Autoglass, Inc.			
	Date	Full name of contributor 🔲 out-of-state PAC (ID	D#:)	Γ	Amount of Contribution (\$)	
	10/18/2024	Ramsdell, Eric				\$5.50
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	NAM - Fleet		Safelite Autoglass, Inc.			
	Date	Full name of contributor 🛛 out-of-state PAC (ID	)		Amount of Contribution (\$)	
	10/25/2024	Ramsdell, Eric				\$5.50
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	NAM - Fleet		Safelite Autoglass, Inc.			
F	Date	Full name of contributor 🛛 out-of-state PAC (ID	)		Amount of Contribution (\$)	
	07/05/2024	Reed, Kirk				\$5.00
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.			
F	Date	Full name of contributor 🔲 out-of-state PAC (ID	)	Γ	Amount of Contribution (\$)	
	07/12/2024	Reed, Kirk				\$5.00
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.			
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	The Instruc	ction Guide explains how to complete this f	iorm.	1	Total pages Schedule A1: Sch: 81/98 Rpt: 92/117	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	Jp, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	07/19/2024	Reed, Kirk			• .	\$5.00
	-	6 Contributor address; City; State; Zip Code		1		
	ļ					
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		Columbus, OH 43235				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/26/2024	Reed, Kirk				\$5.00
	ł	Contributor address; City; State; Zip Code		1		
	ļ					
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		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	District Mana	1ger	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	08/02/2024	Reed, Kirk				\$5.00
	ļ	Contributor address; City; State; Zip Code		1		
	ļ					
	ļ	Columbus, OH 43235				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	District Mana		Safelite Autoglass, Inc.	,		
╞	Date	Full name of contributorout-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	08/09/2024	Reed, Kirk	)		Amount of Contribution (\$)	\$5.00
	00/09/2024			-		ψ3.00
		Contributor address; City; State; Zip Code				
	ļ	Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.			
╞	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	08/16/2024	Reed, Kirk				\$5.00
	ļ	Contributor address; City; State; Zip Code				
	ļ					
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		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.			
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The Ir	struction Guide explains how to complete t	this form.	1 Total pages Schedule A1: Sch: 82/98 Rpt: 93/117
2 FILER	AME		<b>3</b> Filer ID (Ethics Commission Filers)
	Group, Inc. PAC		00068710
4 Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7 Amount of Contribution (\$)
08/23/2	024 Reed, Kirk		\$5.00
	6 Contributor address; City; State; Zip Code		1
	Columbus, OH 43235	<u> </u>	
-	l occupation / Job title (See Instructions)	9 Employer (See Instructions	3)
District	Manager	Safelite Autoglass, Inc.	
Date	Full name of contributor out-of-state PAC	C (ID#:)	Amount of Contribution (\$)
08/30/2			\$5.00
	Contributor address; City; State; Zip Code		
	Columbus, OH 43235		
Princina	l occupation / Job title (See Instructions)	Employer (See Instructions	c)
	Manager	Safelite Autoglass, Inc.	>)
			Amount of Contribution (\$)
Date 09/06/2	Full name of contributor out-of-state PAC 024 Reed, Kirk	C (ID#:)	Amount of Contribution (\$) \$5.00
03/00/2			ψο.ου
	Contributor address; City; State; Zip Code		
	Columbus, OH 43235		
Principa	l occupation / Job title (See Instructions)	Employer (See Instructions	s)
District	Manager	Safelite Autoglass, Inc.	
Date	Full name of contributor out-of-state PAC	C (ID#:)	Amount of Contribution (\$)
09/13/2	024 Reed, Kirk		\$5.00
	Contributor address; City; State; Zip Code		1
<u> </u>	Columbus, OH 43235		
	l occupation / Job title (See Instructions)	Employer (See Instructions	5)
	Manager	Safelite Autoglass, Inc.	<del>.</del>
Date	Full name of contributor out-of-state PAC	C (ID#:)	Amount of Contribution (\$)
09/20/2			\$5.00
	Contributor address; City; State; Zip Code		
	Columbus, OH 43235		
Principa	l occupation / Job title (See Instructions)	Employer (See Instructions	s)
	Manager	Safelite Autoglass, Inc.	

SCHEDULE	A1
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т	he Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1:	
				Ļ	Sch: 83/98 Rpt: 94/117	
	ILER NAME			3	Filer ID (Ethics Commission	Filers)
		up, Inc. PAC			00068710	
4 D		5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
09	9/27/2024	Reed, Kirk				\$5.00
		6 Contributor address; City; State; Zip Code				
		Onterna OLI 19995				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	District Mana	-	Safelite Autoglass, Inc.	-		
	ate	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
10	0/04/2024	Reed, Kirk				\$5.00
		Contributor address; City; State; Zip Code				
	· · · · · · · · · · · · · · · · · · ·	Columbus, OH 43235	1 <u>/0 hastaatiaa</u>	Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	District Mana		Safelite Autoglass, Inc.	_		
	ate		)		Amount of Contribution (\$)	
10	0/11/2024	Reed, Kirk				\$5.00
		Contributor address; City; State; Zip Code				
		Columbus OH 12225				
		Columbus, OH 43235		<u> </u>		
	rincipal occu District Mana	pation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	5)		
			Salelile Autoglass, inc.	-		
	ate	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	÷= 00
10	0/18/2024	Reed, Kirk				\$5.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	rincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	District Mana		Safelite Autoglass, Inc.	5)		
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	ate	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<u>مح مم</u>
<u>т</u>	0/25/2024	Reed, Kirk				\$5.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	rincipal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	District Mana		Safelite Autoglass, Inc.	5)		
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	The Instru	ction Guide explains how to complete thi	is form.	1	Total pages Schedule A1: Sch: 84/98 Rpt: 95/117	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	лр, Inc. PAC			00068710	-
4	Date	5 Full name of contributor out-of-state PAC (II	ID#:)	7	Amount of Contribution (\$)	
	07/05/2024	Roeske, Gary	_			\$10.00
		6 Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	District Mana	1ger	Safelite Autoglass, Inc.			
	Date	Full name of contributor 🛛 out-of-state PAC (I	ID#:)	Γ	Amount of Contribution (\$)	
	07/12/2024	Roeske, Gary				\$10.00
	ļ	Contributor address; City; State; Zip Code		]		
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	Drizoinal agou	Columbus, OH 43235	Employer (Coo Instruction)			
	District Mana	pation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	3)		
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	Date	— —	ID#:)		Amount of Contribution (\$)	¢10.00
	07/19/2024					\$10.00
	ļ	Contributor address; City; State; Zip Code				
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	1	Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	District Mana	ager	Safelite Autoglass, Inc.			
╞	Date	Full name of contributor out-of-state PAC (II	 ID#:)	Γ	Amount of Contribution (\$)	
	07/26/2024	Roeske, Gary			-	\$10.00
	ļ	Contributor address; City; State; Zip Code		1		
	1					
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.			
	Date	Full name of contributor 🔲 out-of-state PAC (II	ID#:)	Γ	Amount of Contribution (\$)	
	08/02/2024	Roeske, Gary				\$10.00
		Contributor address; City; State; Zip Code		]		
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	Driveinel eeu	Columbus, OH 43235				
	Principal occu District Mana	pation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	3)		
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	The Instruc	ction Guide explains how to complete th	nis form.	1	Total pages Schedule A1: Sch: 85/98 Rpt: 96/117	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	ıp, Inc. PAC			00068710	
4	Date	5 Full name of contributor 🔲 out-of-state PAC (	(ID#:)	7	Amount of Contribution (\$)	
	08/09/2024	Roeske, Gary				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	District Mana	ıger	Safelite Autoglass, Inc.			
	Date	Full name of contributor 🛛 out-of-state PAC (	(ID#:)	Τ	Amount of Contribution (\$)	
	08/16/2024	Roeske, Gary		]		\$10.00
		Contributor address; City; State; Zip Code		]		
	Dringinal occu	Columbus, OH 43235 pation / Job title (See Instructions)	Employer (See Instruction	<u> </u>		
	District Mana		Employer (See Instructions Safelite Autoglass, Inc.	5)		
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	Date 08/23/2024		(ID#:)		Amount of Contribution (\$)	\$10.00
	0012312024			-		ΦΤΟ'ΟΟ
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	District Mana	ager	Safelite Autoglass, Inc.			
F	Date	Full name of contributor 🔲 out-of-state PAC (	(ID#:)	Γ	Amount of Contribution (\$)	
	08/30/2024	Roeske, Gary				\$10.00
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	District Mana		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (	(ID#:)		Amount of Contribution (\$)	
	09/06/2024	Roeske, Gary				\$10.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ج)		
	District Mana		Safelite Autoglass, Inc.	5)		
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	The Instruc	ction Guide explains how to complete t	this form.		1	Total pages Schedule A1: Sch: 86/98 Rpt: 97/117	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	ıр, Inc. PAC				00068710	
4	Date	5 Full name of contributor out-of-state PAC	C (ID#:	)	7	Amount of Contribution (\$)	
	09/13/2024	Roeske, Gary					\$10.00
	ł	6 Contributor address; City; State; Zip Code					
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		Columbus, OH 43235					
8		pation / Job title (See Instructions)		mployer (See Instructions	)		
	District Mana	ager	S	afelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC	 C (ID#:	)		Amount of Contribution (\$)	
	09/20/2024	Roeske, Gary					\$10.00
	1	Contributor address; City; State; Zip Code					
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		Columbus, OH 43235					
		pation / Job title (See Instructions)		mployer (See Instructions	)		
	District Mana	ıger	S	afelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC	C (ID#:	)		Amount of Contribution (\$)	
	09/27/2024	Roeske, Gary					\$10.00
	ļ	Contributor address; City; State; Zip Code					
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		Columbus, OH 43235					
		pation / Job title (See Instructions)		mployer (See Instructions	)		
	District Mana	ıger	<u> </u>	afelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC	C (ID#:	)		Amount of Contribution (\$)	
	10/04/2024	Roeske, Gary					\$10.00
	ļ	Contributor address; City; State; Zip Code					
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	ļ	Octombus OLI 19995					
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	Principal occu District Mana	pation / Job title (See Instructions)		mployer (See Instructions afelite Autoglass, Inc.	)		
				alelite Autogiass, mc.			
	Date	Full name of contributor out-of-state PAC	C (ID#:	)		Amount of Contribution (\$)	÷10.00
	10/11/2024	Roeske, Gary					\$10.00
	ļ	Contributor address; City; State; Zip Code					
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		Columbus OH 12225					
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	District Mana	pation / Job title (See Instructions)		mployer (See Instructions afelite Autoglass, Inc.	)		
				alente Autogiass, mo.			

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2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	ıp, Inc. PAC				00068710	
4	Date	5 Full name of contributor out-of-state PAC	 C (ID#:	)	7	Amount of Contribution (\$)	
	10/18/2024	Roeske, Gary					\$10.00
		6 Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	District Mana	ıger		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC	 C (ID#:	)		Amount of Contribution (\$)	
	10/25/2024	Roeske, Gary					\$10.00
		Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
	-	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	District Mana	ıger		Safelite Autoglass, Inc.			
	Date	Full name of contributor 🔲 out-of-state PAC	C (ID#:	)		Amount of Contribution (\$)	
	07/05/2024	Spriet, Daniel					\$10.00
		Contributor address; City; State; Zip Code					
	<b>2</b> 1 1 1	Columbus, OH 43235		(2	ļ		
	-	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	District Mana	-		Safelite Autoglass, Inc.	-		
	Date	Full name of contributor out-of-state PAC	C (ID#:	)		Amount of Contribution (\$)	±40.00
	07/12/2024	Spriet, Daniel					\$10.00
		Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
-	Principal occu	pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	<u>ا</u>		
	District Mana			Safelite Autoglass, Inc.	<i>י</i> י		
╞			<u> </u>	Sulonto / Sulogisco,	-		
	Date	Full name of contributor Out-of-state PAC	C (ID#:	)		Amount of Contribution (\$)	¢10.00
	07/19/2024	Spriet, Daniel					\$10.00
		Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ວ		
	District Mana			Safelite Autoglass, Inc.	''		
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 88/98 Rpt: 99/117	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Safelite Grou	up, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	:)	7	Amount of Contribution (\$)	
	07/26/2024	Spriet, Daniel				\$10.00
	I	6 Contributor address; City; State; Zip Code				
	I					
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		Columbus, OH 43235	•			
8		upation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	District Mana	ager	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Γ	Amount of Contribution (\$)	
	08/02/2024	Spriet, Daniel				\$10.00
	I	Contributor address; City; State; Zip Code				
	I					
	I	Octombus OLI 40005				
	Drivelaser	Columbus, OH 43235		Ĺ		
	District Mana	ipation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	5)		
				—		
	Date	Full name of contributor out-of-state PAC (ID#:	:)		Amount of Contribution (\$)	÷10.00
	08/09/2024					\$10.00
	I	Contributor address; City; State; Zip Code				
	I					
	I	Columbus, OH 43235				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	L 3)		
	District Mana		Safelite Autoglass, Inc.	,		
╞	Date	Full name of contributor Out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	08/16/2024	Spriet, Daniel			, "near of comments (	\$10.00
		Contributor address; City; State; Zip Code				·
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		Columbus, OH 43235				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	District Mana	ager	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	·)	Γ	Amount of Contribution (\$)	
	08/23/2024	Spriet, Daniel				\$10.00
	1	Contributor address; City; State; Zip Code				
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		Columbus, OH 43235	-			
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
	District Mana	ager	Safelite Autoglass, Inc.			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 89/98 Rpt: 100/117	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Safelite Grou				00068710	·
4	Date	5 Full name of contributor Dut-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	08/30/2024	Spriet, Daniel				\$10.00
	I	6 Contributor address; City; State; Zip Code		1		
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	l	Columbus, OH 43235				
Ļ	Drincinal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
°	District Mana		Safelite Autoglass, Inc.	5)		I
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	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/06/2024	Spriet, Daniel				\$10.00
	I	Contributor address; City; State; Zip Code				I
	I					
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		Columbus, OH 43235				
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
	District Mana	ager	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	09/13/2024	Spriet, Daniel				\$10.00
	I	Contributor address; City; State; Zip Code		1		
	I					
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		Columbus, OH 43235		_		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	District Mana	ager	Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	09/20/2024	Spriet, Daniel				\$10.00
	I	Contributor address; City; State; Zip Code		1		
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	I	Columbus, OH 43235				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	District Mana	ager	Safelite Autoglass, Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	09/27/2024	Spriet, Daniel			• •	\$10.00
	I	Contributor address; City; State; Zip Code		1		
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	I					
	l	Columbus, OH 43235				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	District Mana	ager	Safelite Autoglass, Inc.			
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	The Instru	ction Guide explains how to complet	te this fo	orm.	1	Total pages Schedule A1: Sch: 90/98 Rpt: 101/117	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	лр, Inc. PAC				00068710	
4	Date	5 Full name of contributor out-of-state	PAC (ID#:_	)	7	Amount of Contribution (\$)	
	10/04/2024	Spriet, Daniel					\$10.00
	,	6 Contributor address; City; State; Zip Code					
		Columbus, OH 43235					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	)		
	District Mana	ager		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state I	PAC (ID#:_	)		Amount of Contribution (\$)	
	10/11/2024	Spriet, Daniel					\$10.00
	ļ	Contributor address; City; State; Zip Code					
	ļ						
		Columbus, OH 43235					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	District Mana	ager		Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state	PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	10/18/2024	Spriet, Daniel					\$10.00
		Contributor address; City; State; Zip Code					
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		Columbus, OH 43235					
		pation / Job title (See Instructions)		Employer (See Instructions	)		
	District Mana	1ger		Safelite Autoglass, Inc.			
	Date	Full name of contributor 🔲 out-of-state I	PAC (ID#:	)		Amount of Contribution (\$)	
	10/25/2024	Spriet, Daniel					\$10.00
	ļ	Contributor address; City; State; Zip Code					
	ļ						
		Columbus, OH 43235					
		pation / Job title (See Instructions)		Employer (See Instructions	)		
	District Mana	ıger		Safelite Autoglass, Inc.	_		
	Date	Full name of contributor out-of-state I	PAC (ID#:	)		Amount of Contribution (\$)	
	07/05/2024	Sprigler, Edward					\$12.50
	ļ	Contributor address; City; State; Zip Code					
	ļ						
	ļ						
		Columbus, OH 43235					
		pation / Job title (See Instructions)		Employer (See Instructions	)		
	VP Strategic	Initiatives		Safelite Autoglass, Inc.			

	The Instruc	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 91/98 Rpt: 102/117	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	Jp, Inc. PAC			00068710	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	07/12/2024	Sprigler, Edward				\$12.50
		6 Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> -)		
0	VP Strategic		Safelite Autoglass, Inc.	>)		
	Date	Full name of contributor out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	07/19/2024	Sprigler, Edward	/			\$12.50
	011101202					Ψ12.00
		Contributor address, Ory, State, Ep Code				
		Columbus, OH 43235				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP Strategic	Initiatives	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	07/05/2024	Thomas, Erin				\$7.50
		Contributor address; City; State; Zip Code		]		
		Columbus, OH 43235				
$\vdash$	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	) 5)		
	People & LD	Director	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/12/2024	Thomas, Erin				\$7.50
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
_	Drincinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Principal occu People & LD		Safelite Autoglass, Inc.	)		
╞	Date			Г	Amount of Contribution (\$)	
	07/19/2024	Full name of contributor out-of-state PAC (ID#: Thomas, Erin	)			\$7.50
	011101202.	Contributor address; City; State; Zip Code				ψ1.00
		Columbus, OH 43235				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	People & LD	Director	Safelite Autoglass, Inc.			
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	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 92/98 Rpt: 103/117	
2	FILER NAME			3	Filer ID (Ethics Commission F	-ilers)
	Safelite Grou	Jp, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	07/26/2024	Thomas, Erin				\$7.50
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	People & LD	Director	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	08/02/2024	Thomas, Erin				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	)		
	People & LD	Director	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/09/2024	Thomas, Erin				\$7.50
		Contributor address; City; State; Zip Code				
	<b>D</b> : :	Columbus, OH 43235		Ļ		
	Principal occu People & LD	pation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	)		
	-		Salellile Aulogiass, inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	÷= 50
	08/16/2024	Thomas, Erin				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Principal occu People & LD		Safelite Autoglass, Inc.	9		
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	Date 08/23/2024	Full name of contributor out-of-state PAC (ID#: Thomas, Erin	)		Amount of Contribution (\$)	\$7.50
	08/23/2024					Φ1.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	People & LD		Safelite Autoglass, Inc.	,		
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SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 93/98 Rpt: 104/117	
<u>⊢</u>	FILER NAME		1	2	Filer ID (Ethics Commission F	ilare)
	Safelite Grou	ıp, Inc. PAC			00068710	liers)
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	08/30/2024	Thomas, Erin				\$7.50
		6 Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	People & LD	Director	Safelite Autoglass, Inc.			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	09/06/2024	Thomas, Erin				\$7.50
		Contributor address; City; State; Zip Code				
	D i vizel essu	Columbus, OH 43235		Ĺ		
	Principal occu People & LD	pation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	5)		
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	Date		)		Amount of Contribution (\$)	÷7 F0
	09/13/2024	Thomas, Erin				\$7.50
		Contributor address; City; State; Zip Code	ſ			
		Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	People & LD	· · · ·	Safelite Autoglass, Inc.			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/20/2024	Thomas, Erin	/			\$7.50
		Contributor address; City; State; Zip Code				
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		Columbus, OH 43235	ſ			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	People & LD	Director	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/27/2024	Thomas, Erin				\$7.50
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	People & LD	Director	Safelite Autoglass, Inc.			

	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 94/98 Rpt: 105/117	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Grou	Jp, Inc. PAC			00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	10/04/2024	Thomas, Erin			•••	\$7.50
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	People & LD	Director	Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/11/2024	Thomas, Erin				\$7.50
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	People & LD	Director	Safelite Autoglass, Inc.			
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	10/18/2024	Thomas, Erin				\$7.50
		Contributor address; City; State; Zip Code				
			ſ			
		Columbus, OH 43235				
$\vdash$	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	People & LD		Safelite Autoglass, Inc.	"		
╞	Date			<u> </u>	Amount of Contribution (\$)	
	10/25/2024	Full name of contributor out-of-state PAC (ID#: Thomas, Erin	)		Amount of Contribution (\$)	\$7.50
	10/20/2024					Ψ1.50
		Contributor address; City; State; Zip Code				
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		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	People & LD	Director	Safelite Autoglass, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	07/05/2024	Zajic, Scot				\$50.00
		Contributor address; City; State; Zip Code				
			ſ			
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP Legislativ	/e Affairs	Safelite Autoglass, Inc.			

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	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 95/98 Rpt: 106/117	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Safelite Grou	up, Inc. PAC			00068710	
4	Date	5 Full name of contributor Out-of-state PAC (IE	)#:)	7	Amount of Contribution (\$)	
	07/12/2024	Zajic, Scot				\$50.00
	I	6 Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	VP Legislativ	/e Affairs	Safelite Autoglass, Inc.	_		
	Date		D#:)	Ī	Amount of Contribution (\$)	
	07/19/2024	Zajic, Scot				\$50.00
	I	Contributor address; City; State; Zip Code		]		
<u> </u>	Dringingl occu	Columbus, OH 43235 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	VP Legislativ		Employer (See Instructions Safelite Autoglass, Inc.	3)		
⊨	_			<del>—</del>	to - stribution (f)	
	Date 07/26/2024	Full name of contributor out-of-state PAC (IE	)#:)		Amount of Contribution (\$)	ቀደብ ባበ
	07/26/2024	Zajic, Scot		•		\$50.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP Legislativ	<i>J</i> e Affairs	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (IE	D#:)	Γ	Amount of Contribution (\$)	
	08/02/2024	Zajic, Scot				\$50.00
	I	Contributor address; City; State; Zip Code		1		
L		Columbus, OH 43235				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
L	VP Legislativ		Safelite Autoglass, Inc.	_		
	Date	Full name of contributor Out-of-state PAC (IE	)#:)		Amount of Contribution (\$)	÷=0.00
	08/09/2024	Zajic, Scot				\$50.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
_	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ار</u> ۱		
	VP Legislativ		Safelite Autoglass, Inc.	''		
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The Instruction Guide explains how to complete this form.					1	Total pages Schedule A1: Sch: 96/98 Rpt: 107/117	
2	2 FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Safelite Group, Inc. PAC					00068710	
4	Date	5 Full name of contributor out-of-sta	ate PAC (ID#:	)	7	Amount of Contribution (\$)	
	08/16/2024	Zajic, Scot	-				\$50.00
		6 Contributor address; City; State; Zip Cod					
		Columbus, OH 43235					
8		pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	VP Legislativ	/e Affairs		Safelite Autoglass, Inc.			
	Date	Full name of contributor 🗌 out-of-sta	ate PAC (ID#:	)		Amount of Contribution (\$)	
	08/23/2024	Zajic, Scot					\$50.00
		Contributor address; City; State; Zip Cod					
		Columbus, OH 43235					
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	VP Legislativ	/e Affairs		Safelite Autoglass, Inc.			
	Date	Full name of contributor 🗌 out-of-sta	ate PAC (ID#:	)		Amount of Contribution (\$)	
	08/30/2024	Zajic, Scot					\$50.00
	Contributor address; City; State; Zip Code						
$\vdash$	Columbus, OH 43235		Employer (Cas Instructions	Ĺ			
	VP Legislativ	pation / Job title (See Instructions)		Employer (See Instructions Safelite Autoglass, Inc.	5)		
╘	_			Salelile Autoglass, mo.	-		
	Date		ate PAC (ID#:	)		Amount of Contribution (\$)	<u> </u>
	09/06/2024	Zajic, Scot					\$50.00
		Contributor address; City; State; Zip Cod	е				
		Columbus, OH 43235					
$\vdash$	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> נ)		
	VP Legislativ	,		Safelite Autoglass, Inc.	''		
╞	Date			· · · · · · · · · · · · · · · · · · ·	1	Amount of Contribution (\$)	
	09/13/2024	Zajic, Scot	ate PAC (ID#:	)			\$50.00
	00/10/2021					Ψ00.00	
	Contributor address; City; State; Zip Code						
		Columbus, OH 43235					
⊢	Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions			
VP Legislative Affairs Safelite Autoglass, Ir			Safelite Autoglass, Inc.				
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The Instruction Guide explains how to complete this form.					Total pages Schedule A1: Sch: 97/98 Rpt: 108/117	
2	2 FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Safelite Group, Inc. PAC				00068710	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	:)	7	Amount of Contribution (\$)	
	09/20/2024	Zajic, Scot				\$50.00
		6 Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	VP Legislativ	/e Affairs	Safelite Autoglass, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#	:)	Γ	Amount of Contribution (\$)	
	09/27/2024	Zajic, Scot				\$50.00
		Contributor address; City; State; Zip Code		1		
		Columbus, OH 43235				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP Legislativ	/e Affairs	Safelite Autoglass, Inc.			
	Date     Full name of contributor     out-of-state PAC (ID#:)		:)		Amount of Contribution (\$)	
	10/04/2024 Zajic, Scot					\$50.00
	Contributor address; City; State; Zip Code		1			
	Columbus, OH 43235			Ĺ		
	VP Legislativ	pation / Job title (See Instructions)	Employer (See Instructions Safelite Autoglass, Inc.	5)		
	_			-		
	Date	Full name of contributor out-of-state PAC (ID#:	:)		Amount of Contribution (\$)	+=== 00
	10/11/2024	Zajic, Scot				\$50.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
⊢			Employer (See Instructions	<u> </u> ນ		
	VP Legislativ		Safelite Autoglass, Inc.	<i>,</i>		
╞	_			1	Amount of Contribution (\$)	
	Date 10/18/2024	Full name of contributor out-of-state PAC (ID#: Zajic, Scot	:		Amount of Contribution (\$)	\$50.00
		-		-		φυυ.υυ
		Contributor address; City; State; Zip Code				
		Columbus, OH 43235				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	VP Legislative Affairs Safelite Autoglass, Inc.			,		
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MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 98/98 Rpt: 109/117
2 FILER NAME Safelite Group, Inc. PAC	3 Filer ID (Ethics Commission Filers) 00068710
4 Date       5 Full name of contributor       out-of-state PAC (ID#:)         10/25/2024       Zajic, Scot         6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$50.00
Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	ions)
VP Legislative Affairs Safelite Autoglass, In	IC.

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filer	s)		
Sch: 1/8 Rpt: 110/117	Safelite Group, Inc. PAC 00068710			
4 Date	5 Payee name			
10/20/2024	Bell, Keith (Rep.)			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$250.00	PO Box 1178			
Expenditure from corporate funds	Forney, TX 75126			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By			
	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Keith Bell/Support/2024 General			
	Keith Beil/Support/2024 General			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
10/20/2024	Burrows, Dustin (Rep.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$500.00	PO Box 2569			
Expenditure from corporate funds	Lubbock, TX 79408			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By			
	Candidate/Officeholder/Political Committee Dustin Burrows/Support/2024 General			
	Dustin Burrows/Support/2024 General			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
10/20/2024	Button, Angie (Rep.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$250.00	P.O. Box 832748			
Expenditure from corporate funds	Richardson, TX 75083			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By			
	Candidate/Officeholder/Political Committee Angie Button/Support/2024 General			
	Angle Button/Support/2024 General			
Complete ONLV if direct	Candidate/Officeholder name Office sought Office held			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	0			

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Food/Beverage Expense Pollir Gift/Awards/Memorials Expense Printi	Repayment/Reimbursement       Solicitation/Fundraising Expense         overhead/Rental Expense       Transportation Equipment & Related Expense         g Expense       Travel in District         mg Expense       Travel Out of District         oormplete this form.       OTHER (enter a category not listed above)		
1 Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)		
Sch: 2/8 Rpt: 111/117	Safelite Group, Inc. PAC	00068710		
4 Date	Payee name			
10/20/2024	Capriglione, Giovanni (Rep.)			
6 Amount (\$)	Payee address; City; State; Zip	Code		
\$1,500.00	PO Box 92007			
Expenditure from corporate funds	Southlake, TX 76092			
8 PURPOSE	a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.		
	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense Giovanni Capriglione/Support/2024 General		
		Clovanni Capingione/Support/2024 Ceneral		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office	sought Office held		
Date	Payee name			
10/20/2024	Creighton, C. Brandon (Sen.)			
Amount (\$)	Payee address; City; State; Zip	Code		
\$500.00	2257 N. Loop 336			
	Ste. 140-366			
Expenditure from corporate funds	Conroe, TX 77304			
PURPOSE	a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.		
	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense C. Brandon Creighton/Support/2026 Primary		
		C. Brandon Creighton/Support/2020 Finnary		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office	sought Office held		
Date	Payee name			
10/20/2024	Hancock, Kelly (Sen.)			
Amount (\$)	Payee address; City; State; Zip	Codo		
\$500.00	P.O. Box 821349	Coue		
4300.00	1.0. Dox 021045			
Expenditure from corporate funds	Richland Hills, TX 76182			
PURPOSE	a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.		
	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense Kelly Hancock/Support/2026 Primary		
Complete ONU V if direct	Condidata/Officeholder name	sought Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	· ·			

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement     Solicitation/Fundraising Expense       Fees     Office Overhead/Rental Expense     Transportation Equipment & Related Expense       Food/Beverage Expense     Polling Expense     Travel in District       -     Gift/Awards/Memorials Expense     Printing Expense     Travel Out of District			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 3/8 Rpt: 112/117	Safelite Group, Inc. PAC 00068710			
4 Date	5 Payee name			
10/20/2024	Harris Davila, Caroline (Rep.)			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$500.00	PO Box 700			
Expenditure from corporate funds	Round Rock, TX 78680			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Contributions/Donations Made By			
	Candidate/Officeholder/Political Committee Caroline Harris Davila/Support/2024 General			
	Caroline hams bavila Support 2024 General			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
10/20/2024	Hughes, Bryan (Sen.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$500.00	PO Box 450			
Expenditure from corporate funds	Mineola, TX 75773			
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Contributions/Donations Made By Candidate/Officeholder/Political Committee</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense</li> </ul>			
	Bryan Hughes/Support/2026 Primary			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
10/20/2024	Hull, Lacey (Rep.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$500.00	PO Box 19231			
Expenditure from corporate funds	Houston, TX 77224			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee			
	Lacey Hull/Support/2024 General			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a)         Event Expense       Loan Repayment/Reimbursement       Solicitation/Fundraising Expense         Fees       Office Overhead/Rental Expense       Transportation Equipment & Related Expense         Food/Beverage Expense       Polling Expense       Travel in District         Gitf/Awards/Memorials Expense       Printing Expense       Travel Out of District         Committee       Legal Services       Salaries/Wages/Contract Labor       OTHER (enter a category not listed above)			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 4/8 Rpt: 113/117	Safelite Group, Inc. PAC     00068710			
4 Date	5 Payee name			
10/20/2024	Hunter, Todd (Rep.)			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$500.00	445 Cape Henry			
Expenditure from corporate funds	Corpus Christi, TX 78412			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Contributions/Donations Made By			
-	Candidate/Officeholder/Political Committee			
	Todd Hunter/Support/2024 General			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
10/20/2024	Johnson, Ann (Rep.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$500.00	PO Box 56386			
Expenditure from corporate funds	Houston, TX 77256			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF	Contributions/Donations Made By			
EXPENDITURE	Candidate/Officeholder/Political Committee			
	Ann Johnson/Support/2024 General			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OF	6			
Date	Payee name			
10/20/2024	Johnson, Nathan (Sen.)			
Amount (\$)	Payee address; City; State; Zip Code			
.,				
\$500.00	P.O. Box 670994			
Expenditure from corporate funds	Dallas, TX 75367			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF	Contributions/Donations Made By			
EXPENDITURE	Candidate/Officeholder/Political Committee			
	Nathan Johnson/Support/2024 General			
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held			

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 5/8 Rpt: 114/117	Safelite Group, Inc. PAC 00068710			
4 Date	5 Payee name			
10/20/2024	Lujan, John (Rep.)			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$250.00	PO Box 14479			
Expenditure from corporate funds	San Antonio, TX 78214			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By			
	Candidate/Officeholder/Political Committee John Lujan/Support/2024 General			
	John Eujan/Support/2024 General			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
10/20/2024	Menendez, Jose (Sen.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$500.00	P.O. Box 100833			
ψ500.00	1.0. Box 100035			
Expenditure from corporate funds	San Antonio, TX 78201			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By			
	Candidate/Officeholder/Political Committee			
	Jose Menendez/Support/2026 Primary			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
10/20/2024	Meyer, Morgan (Rep.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$250.00	3838 Oak Lawn Avenue, Suite 400			
Expenditure from corporate funds	Dallas, TX 75219			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By			
	Candidate/Officeholder/Political Committee Morgan Meyer/Support/2024 General			
	Morgan Meyer/Support/2024 General			
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held			

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
<b>1</b> Total pages Schedule F1:	2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)		
Sch: 6/8 Rpt: 115/117	Safelite Group, Inc. PAC	00068710		
4 Date	5 Payee name			
10/20/2024	Nichols, Robert (Sen.)			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$500.00	P.O. Box 2347			
Expenditure from corporate funds	Jacksonville, TX 75766			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE		butside of Texas. Complete Schedule T.		
		TX, officeholder living expense		
	Robert Nichol	ls/Support/2026 Primary		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held		
Date	Payee name			
10/20/2024	Oliverson, Tom (Rep.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$1,000.00	1 E. Greenway Plza., Ste 225			
Expenditure from corporate funds	Houston, TX 77046			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE		outside of Texas. Complete Schedule T.		
		TX, officeholder living expense		
	I om Oliverso	n/Support/2024 General		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held		
Date	Payee name			
10/20/2024	Parker, Tan (Sen.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$1,500.00	P.O. Box 271741			
\$1,000.00				
Expenditure from corporate funds	Flower Mound, TX 75027			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE		butside of Texas. Complete Schedule T.		
		TX, officeholder living expense upport/2024 General		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held		

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       -     Gift/Awards/Memorials Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schedule F1:	2 FILER NAME	<b>B</b> Filer ID (Ethics Commission Filers)		
Sch: 7/8 Rpt: 116/117	Safelite Group, Inc. PAC	00068710		
4 Date	5 Payee name			
10/20/2024	Patrick, Dan			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$1,000.00	PO Box 685085			
Expenditure from corporate funds	Austin, TX 78768			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE		Itside of Texas. Complete Schedule T.		
		rx, officeholder living expense Jpport/2026 Primary		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held		
Date	Payee name			
10/20/2024	Paul, Dennis (Rep.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$500.00	626 1/2 Barringer Ln., Ste. E			
Expenditure from corporate funds	Webster, TX 77598			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE		Itside of Texas. Complete Schedule T.		
		rx, officeholder living expense upport/2024 General		
		uppor 2024 General		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held		
Date	Payee name			
10/20/2024	Perez, Mary (Rep.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$500.00	6200 Gulf Fwy #125			
Expenditure from corporate funds	Houston, TX 77023			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By	Itside of Texas. Complete Schedule T.		
		rX, officeholder living expense Ipport/2024 General		
		apportzoza General		
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held		

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 8/8 Rpt: 117/117	Safelite Group, Inc. PAC 00068710			
4 Date	5 Payee name			
10/20/2024	Phelan, Dade (Rep.)			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$1,000.00	P.O. Box 848			
Expenditure from corporate funds	Nederland, TX 77627			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By			
	Candidate/Officeholder/Political Committee			
	Dade Phelan/Support/2024 General			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
10/20/2024	Schwertner, Charles (Sen.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$1,000.00	P.O. Box 2448			
φ1,000.00	1.0. Box 2440			
Expenditure from corporate funds	Georgetown, TX 78627			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By			
	Candidate/Officeholder/Political Committee			
	Charles Schwertner/Support/2026 Primary			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OI				
Date	Payee name			
10/20/2024	Zaffirini, Judith (Sen.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$500.00	PO BOX 627			
\$500.00				
Expenditure from corporate funds	Laredo, TX 78042			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By			
	Candidate/Officeholder/Political Committee			
	Judith Zaffirini/Support/2026 Primary			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			