

**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: 118			
3 COMMITTEE NAME Safelite Group, Inc. PAC		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2026 Date Hand-delivered or Date Postmarked Receipt # <input type="text"/> Amount <input type="text"/> Date Processed Date Imaged				
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address						
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7400 Safelite Way Columbus, OH 43235						
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Gretchen			MI		
	NICKNAME Jeffries	LAST SUFFIX				
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 7400 Safelite Way Columbus, OH 43235	APT / SUITE #;	CITY;	STATE;	ZIP CODE	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; 7400 Safelite Way Columbus, OH 43235	APT / SUITE #;	CITY;	STATE;	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE (614) 210-9266	PHONE NUMBER	EXTENSION			
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff					
10 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
11 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special				

GO TO PAGE 2

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

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Safelite Group, Inc. PAC		13 FILER ID (Ethics Commission Filers) 00068710
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported 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	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 9,353.05
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 198,824.85
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
16 AFFIDAVIT		
<p>I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.</p> <p style="text-align: right;">_____ Gretchen Jeffries _____ Signature of Campaign Treasurer</p>		
AFFIX NOTARY STAMP / SEAL ABOVE		
Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.		
_____ Signature of officer administering oath	_____ Printed name of officer administering oath	_____ Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 118

17 COMMITTEE NAME Safelite Group, Inc. PAC	18 Filer ID (Ethics Commission Filers) 00068710
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 9,353.05	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS \$	
4. <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
6. <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION \$	
7. <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION \$	
8. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
9. <input type="checkbox"/> SCHEDULE E: LOANS \$	
10. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
11. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$	
12. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$	
13. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$	
14. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
15. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/115 Rpt: 4/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 07/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$5.00
	8 Principal occupation / Job title (See Instructions) Quality Manager	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Quality Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Quality Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Quality Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Quality Manager	Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/115 Rpt: 5/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$5.00
	8 Principal occupation / Job title (See Instructions) Quality Manager	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Quality Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Quality Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Quality Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Quality Manager	Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/115 Rpt: 6/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$5.00
	8 Principal occupation / Job title (See Instructions) Quality Manager	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Quality Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Quality Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Quality Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Quality Manager	Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/115 Rpt: 7/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$5.00
	8 Principal occupation / Job title (See Instructions) Quality Manager	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Quality Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Quality Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Quality Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Quality Manager	Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 11/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$5.00
	8 Principal occupation / Job title (See Instructions) Quality Manager	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Quality Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Quality Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Quality Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
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2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 12/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfman, Chad	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Quality Manager		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
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2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
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	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	7 Amount of Contribution (\$) \$96.15
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	7 Amount of Contribution (\$) \$96.15
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/115 Rpt: 13/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	7 Amount of Contribution (\$) \$96.15
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/115 Rpt: 14/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 12/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	7 Amount of Contribution (\$) \$96.15
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cacchillo, Renee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) SVP Customer, Brand, Tech		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Regional VP		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/115 Rpt: 15/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$5.00
	8 Principal occupation / Job title (See Instructions) Regional VP	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Regional VP	Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Regional VP	Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Regional VP	Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Regional VP	Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/115 Rpt: 16/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 08/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$5.00
	8 Principal occupation / Job title (See Instructions) Regional VP	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Regional VP	Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Regional VP	Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Regional VP	Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Regional VP	Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/115 Rpt: 17/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$5.00
	8 Principal occupation / Job title (See Instructions) Regional VP	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Regional VP	Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Regional VP	Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Regional VP	Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Regional VP	Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/115 Rpt: 18/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 11/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$5.00
	8 Principal occupation / Job title (See Instructions) Regional VP	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Regional VP	Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Regional VP	Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Regional VP	Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Regional VP	Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/115 Rpt: 19/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$5.00
	8 Principal occupation / Job title (See Instructions) Regional VP	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Regional VP	Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Brenton Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Regional VP	Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Corporate Counsel	Employer (See Instructions) Safelite Group Inc
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Corporate Counsel	Employer (See Instructions) Safelite Group Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/115 Rpt: 20/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Corporate Counsel		9 Employer (See Instructions) Safelite Group Inc
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/115 Rpt: 21/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Corporate Counsel		9 Employer (See Instructions) Safelite Group Inc
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/115 Rpt: 22/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Corporate Counsel		9 Employer (See Instructions) Safelite Group Inc
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/115 Rpt: 23/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Corporate Counsel		9 Employer (See Instructions) Safelite Group Inc
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/115 Rpt: 24/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 12/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Corporate Counsel		9 Employer (See Instructions) Safelite Group Inc
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Trisha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/115 Rpt: 25/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	7 Amount of Contribution (\$) \$3.50
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) District Manager		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/115 Rpt: 26/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	7 Amount of Contribution (\$) \$3.50
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) District Manager		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/115 Rpt: 27/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	7 Amount of Contribution (\$) \$3.50
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) District Manager		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/115 Rpt: 28/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	7 Amount of Contribution (\$) \$3.50
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) District Manager		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/115 Rpt: 29/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	7 Amount of Contribution (\$) \$3.50
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) District Manager		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diefenbach, Robert	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/115 Rpt: 30/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Quality Manager		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/115 Rpt: 31/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Quality Manager		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/115 Rpt: 32/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Quality Manager		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/115 Rpt: 33/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Quality Manager		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/115 Rpt: 34/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Quality Manager		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbinghaus, Brandon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/115 Rpt: 35/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 07/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) District Manager		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/115 Rpt: 36/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) District Manager		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/115 Rpt: 37/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) District Manager		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/115 Rpt: 38/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) District Manager		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/115 Rpt: 39/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 11/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) District Manager		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/115 Rpt: 40/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 12/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellington, Brad	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) District Manager		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Cynthia	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Cynthia	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Cynthia	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Cynthia	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/115 Rpt: 41/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 08/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Cynthia	7 Amount of Contribution (\$) \$96.15
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) VP and General Counsel		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Cynthia	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Cynthia	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Cynthia	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Cynthia	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/115 Rpt: 42/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Cynthia	7 Amount of Contribution (\$) \$96.15
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) VP and General Counsel		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Cynthia	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP and General Counsel		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Group Inc
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Group Inc
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Group Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/115 Rpt: 43/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$2.00
	8 Principal occupation / Job title (See Instructions) District Manager	9 Employer (See Instructions) Safelite Group Inc
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Group Inc
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Group Inc
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Group Inc
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Group Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/115 Rpt: 44/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 08/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$2.00
	8 Principal occupation / Job title (See Instructions) District Manager	9 Employer (See Instructions) Safelite Group Inc
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Group Inc
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Group Inc
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Group Inc
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Group Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/115 Rpt: 45/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$2.00
	8 Principal occupation / Job title (See Instructions) District Manager	9 Employer (See Instructions) Safelite Group Inc
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Group Inc
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Group Inc
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Group Inc
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Group Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/115 Rpt: 46/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 11/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$2.00
	8 Principal occupation / Job title (See Instructions) District Manager	9 Employer (See Instructions) Safelite Group Inc
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Group Inc
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Group Inc
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Group Inc
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Group Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/115 Rpt: 47/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$2.00
	8 Principal occupation / Job title (See Instructions) District Manager	9 Employer (See Instructions) Safelite Group Inc
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Group Inc
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Glenn Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Group Inc
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Corporate Counsel	Employer (See Instructions) Safelite Group Inc
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Corporate Counsel	Employer (See Instructions) Safelite Group Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/115 Rpt: 48/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$25.00
	8 Principal occupation / Job title (See Instructions) Corporate Counsel	9 Employer (See Instructions) Safelite Group Inc
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Corporate Counsel	Employer (See Instructions) Safelite Group Inc
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Corporate Counsel	Employer (See Instructions) Safelite Group Inc
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Corporate Counsel	Employer (See Instructions) Safelite Group Inc
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Corporate Counsel	Employer (See Instructions) Safelite Group Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/115 Rpt: 49/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$25.00
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Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Corporate Counsel	Employer (See Instructions) Safelite Group Inc
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Corporate Counsel	Employer (See Instructions) Safelite Group Inc
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$25.00
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	Principal occupation / Job title (See Instructions) Corporate Counsel	Employer (See Instructions) Safelite Group Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/115 Rpt: 50/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Corporate Counsel		9 Employer (See Instructions) Safelite Group Inc
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Corporate Counsel		Employer (See Instructions) Safelite Group Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/115 Rpt: 51/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$25.00
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Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Corporate Counsel	Employer (See Instructions) Safelite Group Inc
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Corporate Counsel	Employer (See Instructions) Safelite Group Inc
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Corporate Counsel	Employer (See Instructions) Safelite Group Inc
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Corporate Counsel	Employer (See Instructions) Safelite Group Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/115 Rpt: 52/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 12/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$25.00
	8 Principal occupation / Job title (See Instructions) Corporate Counsel	9 Employer (See Instructions) Safelite Group Inc
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Corporate Counsel	Employer (See Instructions) Safelite Group Inc
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Corporate Counsel	Employer (See Instructions) Safelite Group Inc
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gretchen Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Corporate Counsel	Employer (See Instructions) Safelite Group Inc
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev	Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/115 Rpt: 53/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/115 Rpt: 54/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/115 Rpt: 55/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/115 Rpt: 56/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	Amount of Contribution (\$) \$25.00
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Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
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	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/115 Rpt: 57/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	Amount of Contribution (\$) \$25.00
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Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Barbara	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP, People & Ldershp Dev		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/115 Rpt: 58/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 07/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	7 Amount of Contribution (\$) \$2.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Store Mgr - CTU		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/115 Rpt: 59/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	7 Amount of Contribution (\$) \$2.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Store Mgr - CTU		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/115 Rpt: 60/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	7 Amount of Contribution (\$) \$2.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Store Mgr - CTU		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/115 Rpt: 61/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	7 Amount of Contribution (\$) \$2.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Store Mgr - CTU		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/115 Rpt: 62/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 11/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	7 Amount of Contribution (\$) \$2.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Store Mgr - CTU		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Store Mgr - CTU		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/115 Rpt: 63/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 12/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korber, Karl	7 Amount of Contribution (\$) \$2.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Store Mgr - CTU		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben	Amount of Contribution (\$) \$12.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben	Amount of Contribution (\$) \$12.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben	Amount of Contribution (\$) \$12.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben	Amount of Contribution (\$) \$12.50
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2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 08/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben	7 Amount of Contribution (\$) \$12.50
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben	Amount of Contribution (\$) \$12.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben	Amount of Contribution (\$) \$12.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben	Amount of Contribution (\$) \$12.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben	Amount of Contribution (\$) \$12.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/115 Rpt: 65/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben	7 Amount of Contribution (\$) \$12.50
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben	Amount of Contribution (\$) \$12.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben	Amount of Contribution (\$) \$12.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben	Amount of Contribution (\$) \$12.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben	Amount of Contribution (\$) \$12.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/115 Rpt: 66/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$12.50
	8 Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$12.50
	Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm	Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$12.50
	Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm	Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$12.50
	Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm	Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$12.50
	Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm	Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/115 Rpt: 67/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$12.50
	8 Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$12.50
	Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm	Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$12.50
	Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm	Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$12.50
	Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm	Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$12.50
	Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm	Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/115 Rpt: 68/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 12/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben	7 Amount of Contribution (\$) \$12.50
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo, Reuben	Amount of Contribution (\$) \$12.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) AVP GM Wholesale & Comm		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/115 Rpt: 69/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) ASM		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/115 Rpt: 70/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 08/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) ASM		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/115 Rpt: 71/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	7 Amount of Contribution (\$) \$25.00
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Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/115 Rpt: 72/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 11/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) ASM		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/115 Rpt: 73/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) ASM		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnally, Cheryl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/115 Rpt: 74/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$1.00
	8 Principal occupation / Job title (See Instructions) District Manager	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/115 Rpt: 75/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$1.00
	8 Principal occupation / Job title (See Instructions) District Manager	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/115 Rpt: 76/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$1.00
	8 Principal occupation / Job title (See Instructions) District Manager	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/115 Rpt: 77/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$1.00
	8 Principal occupation / Job title (See Instructions) District Manager	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/115 Rpt: 78/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 12/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$1.00
	8 Principal occupation / Job title (See Instructions) District Manager	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCafferty, Keenan Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
	Principal occupation / Job title (See Instructions) ASM	Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/115 Rpt: 79/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	7 Amount of Contribution (\$) \$7.50
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) ASM		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/115 Rpt: 80/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	7 Amount of Contribution (\$) \$7.50
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) ASM		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/115 Rpt: 81/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	7 Amount of Contribution (\$) \$7.50
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) ASM		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Columbus, OH 43235	\$7.50
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Columbus, OH 43235	\$7.50
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Columbus, OH 43235	\$7.50
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Columbus, OH 43235	\$7.50
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/115 Rpt: 82/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	7 Amount of Contribution (\$) \$7.50
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) ASM		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/115 Rpt: 83/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	7 Amount of Contribution (\$) \$7.50
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) ASM		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, Darrin	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) ASM		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/115 Rpt: 84/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 07/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMara, Brian	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) VP Client Serv Delivery		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMara, Brian	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMara, Brian	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMara, Brian	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMara, Brian	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/115 Rpt: 85/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMara, Brian	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) VP Client Serv Delivery		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMara, Brian	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMara, Brian	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMara, Brian	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMara, Brian	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/115 Rpt: 86/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMara, Brian	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) VP Client Serv Delivery		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMara, Brian	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMara, Brian	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMara, Brian	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMara, Brian	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/115 Rpt: 87/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMara, Brian	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) VP Client Serv Delivery		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMara, Brian	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMara, Brian	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMara, Brian	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) VP Client Serv Delivery		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/115 Rpt: 88/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	7 Amount of Contribution (\$) \$7.50
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/115 Rpt: 89/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	7 Amount of Contribution (\$) \$7.50
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

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4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	7 Amount of Contribution (\$) \$7.50
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.

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4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	7 Amount of Contribution (\$) \$7.50
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/115 Rpt: 92/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	7 Amount of Contribution (\$) \$7.50
	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshida, Kenichi	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) Claim Invgt & Cmplnce Mgr		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/115 Rpt: 93/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 07/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$7.50
	8 Principal occupation / Job title (See Instructions) Claims Management Dir	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
	Principal occupation / Job title (See Instructions) Claims Management Dir	Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
	Principal occupation / Job title (See Instructions) Claims Management Dir	Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
	Principal occupation / Job title (See Instructions) Claims Management Dir	Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
	Principal occupation / Job title (See Instructions) Claims Management Dir	Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/115 Rpt: 94/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$7.50
	8 Principal occupation / Job title (See Instructions) Claims Management Dir	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
	Principal occupation / Job title (See Instructions) Claims Management Dir	Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
	Principal occupation / Job title (See Instructions) Claims Management Dir	Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
	Principal occupation / Job title (See Instructions) Claims Management Dir	Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
	Principal occupation / Job title (See Instructions) Claims Management Dir	Employer (See Instructions) Safelite Autoglass, Inc.

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/115 Rpt: 95/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$7.50
	8 Principal occupation / Job title (See Instructions) Claims Management Dir	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
	Principal occupation / Job title (See Instructions) Claims Management Dir	Employer (See Instructions) Safelite Autoglass, Inc.
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
	Principal occupation / Job title (See Instructions) Claims Management Dir	Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
	Principal occupation / Job title (See Instructions) Claims Management Dir	Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
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	8 Principal occupation / Job title (See Instructions) Claims Management Dir	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
	Principal occupation / Job title (See Instructions) Claims Management Dir	Employer (See Instructions) Safelite Autoglass, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
	Principal occupation / Job title (See Instructions) Claims Management Dir	Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
	Principal occupation / Job title (See Instructions) Claims Management Dir	Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
	Principal occupation / Job title (See Instructions) Claims Management Dir	Employer (See Instructions) Safelite Autoglass, Inc.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/115 Rpt: 97/118
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4 Date 11/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$7.50
	8 Principal occupation / Job title (See Instructions) Claims Management Dir	9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
	Principal occupation / Job title (See Instructions) Claims Management Dir	Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
	Principal occupation / Job title (See Instructions) Claims Management Dir	Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
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Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskvan, Kathy Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
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	6 Contributor address; City; State; Zip Code Columbus, OH 43235	
8 Principal occupation / Job title (See Instructions) Claims Management Dir		9 Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsdell, Eric	Amount of Contribution (\$) \$5.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) NAM - Fleet		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsdell, Eric	Amount of Contribution (\$) \$5.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) NAM - Fleet		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsdell, Eric	Amount of Contribution (\$) \$5.50
	Contributor address; City; State; Zip Code Columbus, OH 43235	
Principal occupation / Job title (See Instructions) NAM - Fleet		Employer (See Instructions) Safelite Autoglass, Inc.
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Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsdell, Eric Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.50
	Principal occupation / Job title (See Instructions) NAM - Fleet	Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsdell, Eric Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.50
	Principal occupation / Job title (See Instructions) NAM - Fleet	Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsdell, Eric Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.50
	Principal occupation / Job title (See Instructions) NAM - Fleet	Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsdell, Eric Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.50
	Principal occupation / Job title (See Instructions) NAM - Fleet	Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/115 Rpt: 100/118
2 FILER NAME Safelite Group, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00068710
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsdell, Eric 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$5.50
	8 Principal occupation / Job title (See Instructions) NAM - Fleet	9 Employer (See Instructions) Safelite Autoglass, Inc.
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Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsdell, Eric Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.50
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Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsdell, Eric Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.50
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	8 Principal occupation / Job title (See Instructions) NAM - Fleet	9 Employer (See Instructions) Safelite Autoglass, Inc.
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	Principal occupation / Job title (See Instructions) NAM - Fleet	Employer (See Instructions) Safelite Autoglass, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsdell, Eric Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.50
	Principal occupation / Job title (See Instructions) NAM - Fleet	Employer (See Instructions) Safelite Autoglass, Inc.
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsdell, Eric Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.50
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	Principal occupation / Job title (See Instructions) NAM - Fleet	Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Kirk Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Kirk Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Kirk Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.

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Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Kirk Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Kirk Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Kirk Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) District Manager	Employer (See Instructions) Safelite Autoglass, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Kirk Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
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Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Kirk Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
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Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Kirk	Amount of Contribution (\$) \$5.00		
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Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Kirk Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$5.00
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Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.		
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spriet, Daniel	Amount of Contribution (\$) \$10.00		
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Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.		
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spriet, Daniel	Amount of Contribution (\$) \$10.00		
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4 Date 07/18/2025	5 Full name of contributor Spriet, Daniel	6 Contributor address; City; State; Zip Code Columbus, OH 43235	1 Total pages Schedule A1: Sch: 106/115 Rpt: 109/118
			3 Filer ID (Ethics Commission Filers) 00068710
8 Principal occupation / Job title (See Instructions) District Manager	9 Employer (See Instructions) Safelite Autoglass, Inc.		
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Date 08/01/2025	Full name of contributor Spriet, Daniel	Amount of Contribution (\$) \$10.00	
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Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spriet, Daniel	Amount of Contribution (\$) \$10.00			
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Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spriet, Daniel Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Safelite Autoglass, Inc.
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 111/115 Rpt: 114/118
2 FILER NAME Safelite Group, Inc. PAC				3 Filer ID (Ethics Commission Filers) 00068710
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	7 Amount of Contribution (\$) \$7.50		
	6 Contributor address; City; State; Zip Code Columbus, OH 43235			
8 Principal occupation / Job title (See Instructions) People & LD Director		9 Employer (See Instructions) Safelite Autoglass, Inc.		
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	Amount of Contribution (\$) \$7.50		
	Contributor address; City; State; Zip Code Columbus, OH 43235			
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.		
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	Amount of Contribution (\$) \$7.50		
	Contributor address; City; State; Zip Code Columbus, OH 43235			
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.		
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	Amount of Contribution (\$) \$7.50		
	Contributor address; City; State; Zip Code Columbus, OH 43235			
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.		
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	Amount of Contribution (\$) \$7.50		
	Contributor address; City; State; Zip Code Columbus, OH 43235			
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 112/115 Rpt: 115/118
2 FILER NAME Safelite Group, Inc. PAC				3 Filer ID (Ethics Commission Filers) 00068710
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	7 Amount of Contribution (\$) \$7.50		
	6 Contributor address; City; State; Zip Code Columbus, OH 43235			
8 Principal occupation / Job title (See Instructions) People & LD Director		9 Employer (See Instructions) Safelite Autoglass, Inc.		
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	Amount of Contribution (\$) \$7.50		
	Contributor address; City; State; Zip Code Columbus, OH 43235			
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.		
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	Amount of Contribution (\$) \$7.50		
	Contributor address; City; State; Zip Code Columbus, OH 43235			
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.		
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	Amount of Contribution (\$) \$7.50		
	Contributor address; City; State; Zip Code Columbus, OH 43235			
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.		
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	Amount of Contribution (\$) \$7.50		
	Contributor address; City; State; Zip Code Columbus, OH 43235			
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 113/115 Rpt: 116/118
2 FILER NAME Safelite Group, Inc. PAC				3 Filer ID (Ethics Commission Filers) 00068710
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	7 Amount of Contribution (\$) \$7.50		
	6 Contributor address; City; State; Zip Code Columbus, OH 43235			
8 Principal occupation / Job title (See Instructions) People & LD Director		9 Employer (See Instructions) Safelite Autoglass, Inc.		
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	Amount of Contribution (\$) \$7.50		
	Contributor address; City; State; Zip Code Columbus, OH 43235			
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.		
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	Amount of Contribution (\$) \$7.50		
	Contributor address; City; State; Zip Code Columbus, OH 43235			
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.		
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	Amount of Contribution (\$) \$7.50		
	Contributor address; City; State; Zip Code Columbus, OH 43235			
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.		
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	Amount of Contribution (\$) \$7.50		
	Contributor address; City; State; Zip Code Columbus, OH 43235			
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 114/115 Rpt: 117/118
2 FILER NAME Safelite Group, Inc. PAC				3 Filer ID (Ethics Commission Filers) 00068710
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	7 Amount of Contribution (\$) \$7.50		
	6 Contributor address; City; State; Zip Code Columbus, OH 43235			
8 Principal occupation / Job title (See Instructions) People & LD Director		9 Employer (See Instructions) Safelite Autoglass, Inc.		
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	Amount of Contribution (\$) \$7.50		
	Contributor address; City; State; Zip Code Columbus, OH 43235			
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.		
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	Amount of Contribution (\$) \$7.50		
	Contributor address; City; State; Zip Code Columbus, OH 43235			
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.		
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	Amount of Contribution (\$) \$7.50		
	Contributor address; City; State; Zip Code Columbus, OH 43235			
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.		
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Erin	Amount of Contribution (\$) \$7.50		
	Contributor address; City; State; Zip Code Columbus, OH 43235			
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			
2 FILER NAME Safelite Group, Inc. PAC			
4 Date 11/28/2025	5 Full name of contributor Thomas, Erin 6 Contributor address; City; State; Zip Code Columbus, OH 43235	1 Total pages Schedule A1: Sch: 115/115 Rpt: 118/118	3 Filer ID (Ethics Commission Filers) 00068710
		7 Amount of Contribution (\$) \$7.50	
8 Principal occupation / Job title (See Instructions) People & LD Director		9 Employer (See Instructions) Safelite Autoglass, Inc.	
Date 12/05/2025	Full name of contributor Thomas, Erin Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50	
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.	
Date 12/12/2025	Full name of contributor Thomas, Erin Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50	
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.	
Date 12/19/2025	Full name of contributor Thomas, Erin Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50	
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.	
Date 12/26/2025	Full name of contributor Thomas, Erin Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$7.50	
Principal occupation / Job title (See Instructions) People & LD Director		Employer (See Instructions) Safelite Autoglass, Inc.	