

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

04/11/2001 17 : 04

<b>1. NAME OF COMMITTEE (in full)</b> <b>Rite Aid Political Action Committee</b>		<b>2. FEC IDENTIFICATION NUMBER</b> C00104083
<b>ADDRESS (number and street)</b> P.O. Box 3165	<input type="checkbox"/> Check if different than previously reported	
<b>CITY, STATE, and ZIP CODE</b> Harrisburg PA 17105		3. <input type="checkbox"/> This committee has qualified as a multi-candidate committee (see FEC Form 1M)

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- Termination report
- Monthly Report Due On:
- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31  |
- Twelfth day report preceding \_\_\_\_\_  
(election type) \_\_\_\_\_  
election on \_\_\_\_\_ In the State of \_\_\_\_\_
- Thirtieth day report following the General Election  
on \_\_\_\_\_ In the State of \_\_\_\_\_
- (b) Is this Report an Amendment  YES  NO

<b>SUMMARY</b>	<b>COLUMN A This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
5. Covering Period <u>01/01/2001</u> through <u>03/31/2001</u>		
6. (a) Cash on Hand, January 1, <u>2001</u> .....		198786.19
(b) Cash on Hand at Beginning of Reporting Period .....	198786.19	
(c) Total Receipts (from line 19) .....	41520.87	41520.87
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	240289.06	240289.06
7. Total Disbursements (from line 30) .....	9360.23	9360.23
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	230928.83	230928.83
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	<b>For further information contact:</b> Federal Election Commission 989 E Street, NW Washington, DC 20463  Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.	
Type or Print Name of Treasurer <b>Electronically Filed by JAMES KRAHULEC</b>	
Signature of Treasurer	Date 04/11/2001

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE <b>Rite Aid Political Action Committee</b>		REPORT COVERING PERIOD FROM 01/01/2001 TO: 03/31/2001	
<b>I. Receipts</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year</b>
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A) .....	4876.09	4876.09	11.a.i.
ii. Unitemized .....	33878.51	33878.51	11.a.ii.
iii. Total .....	38654.60	38654.60	11.a.iii.
b. Political Party Committees .....	0.00	0.00	11.b.
c. Other Political Committees (such as PACs) .....	0.00	0.00	11.c.
d. Total Contributions .....	38654.60	38654.60	11.d.
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00	12.
13. All Loans Received .....	0.00	0.00	13.
14. Loan Repayments Received .....	0.00	0.00	14.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....	0.00	0.00	15.
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees ..	0.00	0.00	16.
17. Other Federal Receipts (Dividends, Interest, etc.) .....	2866.27	2866.27	17.
18. Transfers From Nonfederal Account for Joint Activity .....	0.00	0.00	18.
19. Total Receipts .....	41520.87	41520.87	19.
20. Total Federal Receipts .....	41520.87	41520.87	20.
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share .....	0.00	0.00	21.a.i.
ii. Non-Federal Share .....	0.00	0.00	21.a.ii.
b. Other Federal Operating Expenditures .....	3360.23	3360.23	21.b.
c. Total Operating Expenditures .....	3360.23	3360.23	21.c.
22. Transfers to Affiliated/Other Party Committees .....	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	6000.00	6000.00	23.
24. Independent Expenditures (use Schedule E) .....	0.00	0.00	24.
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Sch. F)	0.00	0.00	25.
26. Loan Repayments Made .....	0.00	0.00	26.
27. Loans Made .....	0.00	0.00	27.
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees .....	0.00	0.00	28.a.
b. Political Party Committees .....	0.00	0.00	28.b.
c. Other Political Committees (such as PACs) .....	0.00	0.00	28.c.
d. Total Contributions Refunds .....	0.00	0.00	28.d.
29. Other Disbursements .....	0.00	0.00	29.
30. Total Disbursements .....	9360.23	9360.23	30.
31. Total Federal Disbursements .....	9360.23	9360.23	31.
<b>III. Net Contributions / Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d) .....	38654.60	38654.60	32.
33. Total Contribution Refunds (from line 28d) .....	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32) .....	38654.60	38654.60	34.
35. Total Federal Operating Expenditures .....	3360.23	3360.23	35.
36. Offsets to Operating Expenditures (from line 15) .....	0.00	0.00	36.
37. Net Operating Expenditures .....	3360.23	3360.23	37.

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>3 / 8</b>
			FOR LINE NUMBER <b>11A1</b>

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**  
**Rite Aid Political Action Committee**

<b>Full Name, Mailing Address, and ZIP Code</b> DONALD BRINDISI  4980 SADDLEBROOK DR  HARRISBURG PA 17112-2100  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION	Date (month, day, year) 03/31/2001	Amount of Each Receipt this Period 208.80 BI-WKLY P/R DED
	Occupation 03-PHARMACY DEVELOPMENT MGR		
	Aggregate Year-to-Date > \$ 208.80		
<b>Full Name, Mailing Address, and ZIP Code</b> FRANKLIN BROWN  1710 MITCHELL RD  HARRISBURG PA 17110-3128  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION	Date (month, day, year) 03/31/2001	Amount of Each Receipt this Period 461.52 BI-WKLY P/R DED
	Occupation SEVERANCE EXEMPT		
	Aggregate Year-to-Date > \$ 461.52		
<b>Full Name, Mailing Address, and ZIP Code</b> GERALD CARDINALE  1129 DRY POWDER CIR  MECHANICSBURG PA 17050-7330  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION	Date (month, day, year) 03/31/2001	Amount of Each Receipt this Period 330.00 BI-WKLY P/R DED
	Occupation 09860-SR VP CATEGORY MGMT		
	Aggregate Year-to-Date > \$ 330.00		
<b>Full Name, Mailing Address, and ZIP Code</b> RONALD CAVARETTA  385 WINCHESTER CIR  MANDEVILLE LA 70448-1938  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION	Date (month, day, year) 03/31/2001	Amount of Each Receipt this Period 230.88 BI-WKLY P/R DED
	Occupation 03-PHARMACY DEVELOPMENT MGR		
	Aggregate Year-to-Date > \$ 230.88		
<b>Full Name, Mailing Address, and ZIP Code</b> CLINTON FUNKHOUSER  14912 E LONGFELLOW AVE  SPOKANE WA 99216-1328  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION	Date (month, day, year) 03/31/2001	Amount of Each Receipt this Period 201.54 BI-WKLY P/R DED
	Occupation 03-PHARMACY DEVELOPMENT MGR		
	Aggregate Year-to-Date > \$ 201.54		
<b>Full Name, Mailing Address, and ZIP Code</b> AHMAD HAMAD  100 LYNMAR LN  SYRACUSE NY 13215-1528  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION	Date (month, day, year) 03/31/2001	Amount of Each Receipt this Period 228.28 BI-WKLY P/R DED
	Occupation 78-WU PHARMACY MANAGER		
	Aggregate Year-to-Date > \$ 228.28		
<b>Full Name, Mailing Address, and ZIP Code</b> JANET HART  2109 E COVENTRY LN  ENOLA PA 17025-1276  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION	Date (month, day, year) 03/31/2001	Amount of Each Receipt this Period 220.14 BI-WKLY P/R DED
	Occupation 09705-MANAGER GOVERNMENT		
	Aggregate Year-to-Date > \$ 220.14		

**SUBTOTALS** of Receipts This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>4 / 8</b>
			FOR LINE NUMBER <b>11A1</b>

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**NAME OF COMMITTEE (In Full)**  
**Rite Aid Political Action Committee**

<b>Full Name, Mailing Address, and ZIP Code</b> DENELDA HORTON  7818 PINE TREE LN SE  TURNER OR 97392-9773  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> RITE AID CORPORATION	<b>Date (month, day, year)</b> 03/31/2001	<b>Amount of Each Receipt this Period</b> 201.60 BI-WKLY P/R DED
	<b>Occupation</b> 02-DISTRICT MANAGER		
	<b>Aggregate Year-to-Date</b> > \$ 201.60		
<b>Full Name, Mailing Address, and ZIP Code</b> CARL JACKSON  32 BROOKGREEN DR  HURRICANE WV 25526-9089  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> RITE AID CORPORATION	<b>Date (month, day, year)</b> 03/31/2001	<b>Amount of Each Receipt this Period</b> 260.50 BI-WKLY P/R DED
	<b>Occupation</b> 01-REGIONAL VP		
	<b>Aggregate Year-to-Date</b> > \$ 260.50		
<b>Full Name, Mailing Address, and ZIP Code</b> MOHAMMAD KHAN  14471 BRANDYWYNE TER  GARDEN GROVE CA 92844-3153  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> RITE AID CORPORATION	<b>Date (month, day, year)</b> 03/31/2001	<b>Amount of Each Receipt this Period</b> 200.49 BI-WKLY P/R DED
	<b>Occupation</b> 02-DISTRICT MANAGER		
	<b>Aggregate Year-to-Date</b> > \$ 200.49		
<b>Full Name, Mailing Address, and ZIP Code</b> CHARLES KIBLER  120 WOODRIDGE DR  HARRISBURG PA 17110-9511  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> RITE AID CORPORATION	<b>Date (month, day, year)</b> 03/31/2001	<b>Amount of Each Receipt this Period</b> 226.96 BI-WKLY P/R DED
	<b>Occupation</b> 09575-GROUP VP LP		
	<b>Aggregate Year-to-Date</b> > \$ 226.96		
<b>Full Name, Mailing Address, and ZIP Code</b> GARY KINCEL  PO BOX 549  MURRYSVILLE PA 15806-0549  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> RITE AID CORPORATION	<b>Date (month, day, year)</b> 03/31/2001	<b>Amount of Each Receipt this Period</b> 255.00 BI-WKLY P/R DED
	<b>Occupation</b> 09660-VP VITAMIN INSTITUTE		
	<b>Aggregate Year-to-Date</b> > \$ 255.00		
<b>Full Name, Mailing Address, and ZIP Code</b> JAMES MASTRIAN  2280 WATERFORD  CAMP HILL PA 17011-1238  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> RITE AID CORPORATION	<b>Date (month, day, year)</b> 03/31/2001	<b>Amount of Each Receipt this Period</b> 256.14 BI-WKLY P/R DED
	<b>Occupation</b> 09660-SEVP MKT AND LOGISTICS		
	<b>Aggregate Year-to-Date</b> > \$ 256.14		
<b>Full Name, Mailing Address, and ZIP Code</b> MICHAEL PODGURSKI  1125 W POWDERHORN RD  MECHANICSBURG PA 17050-2007  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> RITE AID CORPORATION	<b>Date (month, day, year)</b> 03/31/2001	<b>Amount of Each Receipt this Period</b> 240.00 BI-WKLY P/R DED
	<b>Occupation</b> 09512-VP THIRD PARTY OPERATION		
	<b>Aggregate Year-to-Date</b> > \$ 240.00		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>5 / 8</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11A1</b>
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<b>NAME OF COMMITTEE (In Full)</b> <b>Rite Aid Political Action Committee</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> KAREN RUGEN  514 BRIDGEVIEW DR  LEMOYNE PA 17043-1379  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> RITE AID CORPORATION  <b>Occupation</b> 09700-SR VP CORP COMM/PUB AFF  <b>Aggregate Year-to-Date</b> > \$ 300.00	<b>Date (month, day, year)</b> 03/31/2001	<b>Amount of Each Receipt this Period</b> 300.00 BI-WKLY P/R DED	
<b>Full Name, Mailing Address, and ZIP Code</b> KENNETH SIMMONS  1030 BALLANTREE LN  WEST CHESTER PA 19382-6974  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> RITE AID CORPORATION  <b>Occupation</b> 09508-VP PHARMACY OPERATIONS  <b>Aggregate Year-to-Date</b> > \$ 240.00	<b>Date (month, day, year)</b> 03/31/2001	<b>Amount of Each Receipt this Period</b> 240.00 BI-WKLY P/R DED	
<b>Full Name, Mailing Address, and ZIP Code</b> ERIC BORKIN  16 MAYBELLE CT  MECHANICSBURG PA 17050-9516  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> RITE AID CORPORATION  <b>Occupation</b> 09834-EVP PHARMACY SERVICES  <b>Aggregate Year-to-Date</b> > \$ 300.00	<b>Date (month, day, year)</b> 03/31/2001	<b>Amount of Each Receipt this Period</b> 300.00 BI-WKLY P/R DED	
<b>Full Name, Mailing Address, and ZIP Code</b> GARY STEIN  19 WOBURN ABBEY AVE  CAMP HILL PA 17011-1011  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> RITE AID CORPORATION  <b>Occupation</b> 09600-VP STORE DEVELOPMENT  <b>Aggregate Year-to-Date</b> > \$ 253.84	<b>Date (month, day, year)</b> 03/31/2001	<b>Amount of Each Receipt this Period</b> 253.84 BI-WKLY P/R DED	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				<b>4676.09</b>

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>6 / 8</b>
			FOR LINE NUMBER 17

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**NAME OF COMMITTEE (In Full)**  
**Rite Aid Political Action Committee**

<b>Full Name, Mailing Address, and ZIP Code</b> Allfirst Bank  213 Market Street  Harrisburg PA 17105  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer	Date (month, day, year) 01/02/2001	Amount of Each Receipt this Period 991.43 Interest Income
	Occupation		
	Aggregate Year-to-Date > \$ 5 591.43		
<b>Full Name, Mailing Address, and ZIP Code</b> Allfirst Bank  213 Market Street  Harrisburg PA 17105  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer	Date (month, day, year) 02/01/2001	Amount of Each Receipt this Period 991.80 Interest Income
	Occupation		
	Aggregate Year-to-Date > \$ 5 1893.23		
<b>Full Name, Mailing Address, and ZIP Code</b> Allfirst Bank  213 Market Street  Harrisburg PA 17105  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer	Date (month, day, year) 03/01/2001	Amount of Each Receipt this Period 883.04 Interest Income
	Occupation		
	Aggregate Year-to-Date > \$ 5 2866.27		

<b>SUBTOTALS</b> of Receipts This Page (Optional) .....	
<b>TOTALS</b> This Period (last page this line number only) .....	<b>2866.27</b>



<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>		<b>8 / 8</b>
		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER <b>23</b>
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<b>NAME OF COMMITTEE (In Full)</b> <b>Rite Aid Political Action Committee</b>			
<b>Full Name, Mailing Address, and ZIP Code</b> Baucus for U.S. Senate  203 C Street, N.E.  Washington DC 20002	<b>Purpose of Disbursement</b> Contribution - Check #5197 (Senate - MT - ) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 02/01/2001	<b>Amount of Each Disbursement This Period</b> 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Congressional Majority Committee PO Box 395  Bakersfield CA 93302	<b>Purpose of Disbursement</b> Contribution- Bill Thomas - Check #5189 (House - CA - 21) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 03/26/2001	<b>Amount of Each Disbursement This Period</b> 5000.00
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			<b>6000.00</b>