

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

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

FOR LINE NUMBER: PAGE 79 OF 118

(check only one)

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

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NAME OF COMMITTEE (In Full)

RITE AID CORPORATION POLITICAL ACTION COMMITTEE

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

A. PATEL, ARUN, , ,

Mailing Address 19 GAIL CT

City
CLIFTONState
NJZip Code
07013-3603FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RITE AID CORPORATEOccupation (for Individual)
09515-DIRECTOR RX ACQUISITIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2019

Transaction ID : B001036S000189L11A1

Amount of Each Receipt this Period

15.00

☐ Memo Item
PAYROLL DEDUCTION

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

B. PATEL, YOMABEN, , ,

Mailing Address 30 HUNTER LANE

City
CAMP HILLState
PAZip Code
17011FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RITE AID RETAILOccupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2019

Transaction ID : B001034S000190L11A1

Amount of Each Receipt this Period

15.00

☐ Memo Item
PAYROLL DEDUCTION

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

C. PELPHREY, LORI, , ,

Mailing Address 30 HUNTER LANE

City
CAMP HILLState
PAZip Code
17011FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RITE AID RETAILOccupation (for Individual)
DISTRICT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2019

Transaction ID : B001034S000191L11A1

Amount of Each Receipt this Period

20.00

☐ Memo Item
PAYROLL DEDUCTION

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

50.00

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