

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

1 / 21
07/30/1999 16 : 11

1. NAME OF COMMITTEE (in full) Rite Aid Political Action Committee	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported P.O. Box 3165	2. FEC IDENTIFICATION NUMBER C00104083
CITY, STATE, and ZIP CODE 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 Monthly Report Due On:
- February 20 June 20 October 20
 July 15 Quarterly Report March 20 July 20 November 20
 October 15 Quarterly Report April 20 August 20 December 20
 January 31 Year End Report May 20 September 20 January 31
- July 31 Mid-Year Report (Non-election Year Only) Twelfth day report preceding _____
(election type)
 election on _____ In the State of _____
- Termination report on _____ In the State of _____
- Thirtieth day report following the General Election
- (b) Is this Report an Amendment YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>01/01/1999</u> through <u>08/30/1999</u>		
6. (a) Cash on Hand, January 1, <u>1999</u>		70881.82
(b) Cash on Hand at Beginning of Reporting Period	70881.82	
(c) Total Receipts (from line 19)	103350.90	103350.90
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	174232.52	174232.52
7. Total Disbursements (from line 30)	71042.29	71042.29
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	103190.23	103190.23
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	For further information contact: 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 Electronically Filed by Joseph Speaker	
Signature of Treasurer	Date 07/30/1999

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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FEC FORM 3X
(revised 9/98)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE Rite Aid Political Action Committee	REPORT COVERING PERIOD		
	FROM 01/01/1999	TO: 06/30/1999	
	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	34387.05	34387.05	11.a.i.
ii. Unitemized	65463.85	65463.85	11.a.ii.
iii. Total	99850.90	99850.90	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	99850.90	99850.90	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 ..	3500.00	3500.00	16.
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17.
18. Transfers From Nonfederal Account for Joint Activity	0.00	0.00	18.
19. Total Receipts	103350.90	103350.90	19.
20. Total Federal Receipts	103350.90	103350.90	20.
II. Disbursements			
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	1622.29	1622.29	21.b.
c. Total Operating Expenditures	1622.29	1622.29	21.c.
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees	28000.00	28000.00	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	41420.00	41420.00	29.
30. Total Disbursements	71042.29	71042.29	30.
31. Total Federal Disbursements	71042.29	71042.29	31.
III. Net Contributions / Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	99850.90	99850.90	32.
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32)	99850.90	99850.90	34.
35. Total Federal Operating Expenditures	1622.29	1622.29	35.
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36.
37. Net Operating Expenditures	1622.29	1622.29	37.

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	3 / 21
			FOR LINE NUMBER 11A1

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

Full Name, Mailing Address, and ZIP Code MUSTAQUE AHMED 168-07 HIGHLAND AVE JAMAICA NY 11432-2627 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation 78-N/U PHARMACY MANAGER Aggregate Year-to-Date > \$ 240.88	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 240.88 BI-WKLY P/R DED
Full Name, Mailing Address, and ZIP Code JORGE AMADOR 234 MONMOUTH RD ELIZABETH NJ 07206-1450 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation 01-MARKET MANAGER Aggregate Year-to-Date > \$ 215.65	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 215.65 BI-WKLY P/R DED
Full Name, Mailing Address, and ZIP Code CHARLES AMBLER 9 RACHAEL CT. JACKSON NJ 08527-2410 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation 01-MARKET MANAGER Aggregate Year-to-Date > \$ 213.21	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 213.21 BI-WKLY P/R DED
Full Name, Mailing Address, and ZIP Code HAMID AMIRI 8 SCOTS COURT WALNUT CREEK CA 94596 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation 78-N/U PHARMACY MANAGER Aggregate Year-to-Date > \$ 367.74	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 367.74 BI-WKLY P/R DED
Full Name, Mailing Address, and ZIP Code JAMES BARTLETT 17620 8TH AVE N.W. SHORELINE WA 98177-3803 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation 01-MARKET MANAGER Aggregate Year-to-Date > \$ 231.48	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 231.48 BI-WKLY P/R DED
Full Name, Mailing Address, and ZIP Code EDWARD BEASLEY 23040 WEYMOUTH PLAGE VALENCIA CA 91354 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation 01-MARKET MANAGER Aggregate Year-to-Date > \$ 385.02	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 385.02 BI-WKLY P/R DED
Full Name, Mailing Address, and ZIP Code FRANKLYN BERGONZI 1150 Stony Run Hummelstown PA 17036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation EXECUTIVE V.P. Aggregate Year-to-Date > \$ 923.04	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 923.04 BI-WKLY P/R DED

SUBTOTALS of Receipts This Page (Optional)	
TOTALS This Period (last page this line number only)	

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	4 / 21
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NAME OF COMMITTEE (In Full)
Rite Aid Political Action Committee

Full Name, Mailing Address, and ZIP Code FRANKLYN BROWN 1710 Mitchell Avenue Harrisburg PA 17110 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation VICE CHAIRMAN Aggregate Year-to-Date > \$ 523.04	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 923.04 BI-WKLY P/R DED
Full Name, Mailing Address, and ZIP Code DEAN BUTCHART 204 SKEET CT BAKERSFIELD CA 93309 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation 78-N/D PHARMACY MANAGER Aggregate Year-to-Date > \$ 208.34	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 208.34 BI-WKLY P/R DED
Full Name, Mailing Address, and ZIP Code DAVID BUTLER 59 FRANKLIN ST. LEWISTON ME 04240-6012 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation 78-N/D PHARMACY MANAGER Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 250.00 BI-WKLY P/R DED
Full Name, Mailing Address, and ZIP Code GERALD CARDINALE 1129 Dry Powder Circle Mechanicsburg PA 17055 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 660.00	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 660.00 BI-WKLY P/R DED
Full Name, Mailing Address, and ZIP Code PAUL CHACE 5 WHITLEY COURT CARLISLE PA 17013-4380 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation 09632-MANAGER THIRD PARTY Aggregate Year-to-Date > \$ 271.60	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 271.60 BI-WKLY P/R DED
Full Name, Mailing Address, and ZIP Code LANCE CLARK 1610 GRAMERCY PLACE HUMMELSTOWN PA 17036-7024 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation 09544-DIRECTOR LABOR RELATIONS Aggregate Year-to-Date > \$ 214.08	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 214.08 BI-WKLY P/R DED
Full Name, Mailing Address, and ZIP Code AUGUST DOBISH 12 B RICHLAND LANE CAMP HILL PA 17011-2406 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation 09705-MANAGER GOVERNMENT Aggregate Year-to-Date > \$ 240.00	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 240.00 BI-WKLY P/R DED

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	5 / 21
				FOR LINE NUMBER	11A1
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NAME OF COMMITTEE (In Full) Rite Aid Political Action Committee					
Full Name, Mailing Address, and ZIP Code THOMAS DREW 814 MAGNOLIA MODESTO CA 95354		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 202.35 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 03-PHARMACY DEVELOPMENT MGR		Aggregate Year-to-Date > \$ 202.35	
Full Name, Mailing Address, and ZIP Code DONALD FOGAL 526 BROM COURT MECHANICSBURG PA 17055-2571		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 300.72 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 09770-DIRECTOR		Aggregate Year-to-Date > \$ 300.72	
Full Name, Mailing Address, and ZIP Code LARRY FRISBIE 305 SILVER LEAF DRIVE CHRISTIANSBURG VA 24073		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 308.20 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 02-DISTRICT MANAGER		Aggregate Year-to-Date > \$ 308.20	
Full Name, Mailing Address, and ZIP Code CLINTON FUNKHOUSER 14912 E LONGFELLOW SPOKANE WA 99216		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 373.66 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 03-PHARMACY DEVELOPMENT MGR		Aggregate Year-to-Date > \$ 373.66	
Full Name, Mailing Address, and ZIP Code JOSEPH GARVEY 826 Burnt House Road Carlisle PA 17013		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 853.80 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation VICE PRESIDENT		Aggregate Year-to-Date > \$ 853.80	
Full Name, Mailing Address, and ZIP Code LAWRENCE GELMAN 1430 Appletree Road Harrisburg PA 17110		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 462.00 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation VICE PRESIDENT		Aggregate Year-to-Date > \$ 462.00	
Full Name, Mailing Address, and ZIP Code ELLIOT GERSON 538 Bridgeview Drive Lamoyne PA 17043		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 923.04 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation SENIOR V.P.		Aggregate Year-to-Date > \$ 923.04	
SUBTOTALS of Receipts This Page (Optional)					
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			FOR LINE NUMBER 11A1

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

Full Name, Mailing Address, and ZIP Code MARTIN GRASS 10714 Greenspring Avenue Lutherville MD 21093	Name of Employer RITE AID CORPORATION Occupation CHAIRMAN	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 2307.60 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 2307.60		
Full Name, Mailing Address, and ZIP Code AHMAD HAMAD 100 LYNMAR LANE SYRACUSE NY 13215-1528	Name of Employer RITE AID CORPORATION Occupation 78-N/D PHARMACY MANAGER	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 250.43 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 250.43		
Full Name, Mailing Address, and ZIP Code JEFFREY HAMMOND 10 E. PINELAKES DR. WILLIAMSVILLE NY 14221-8311	Name of Employer RITE AID CORPORATION Occupation 01-MARKET MANAGER	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 218.38 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 218.38		
Full Name, Mailing Address, and ZIP Code PAUL HANKO 95B HILL ST. YORK PA 17403	Name of Employer RITE AID CORPORATION Occupation 09660-DIRECTOR	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 208.76 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 208.76		
Full Name, Mailing Address, and ZIP Code JANET HART 2109 E COVENTRY LN ENOLA PA 17025-1276	Name of Employer RITE AID CORPORATION Occupation 09705-MANAGER GOVERNMENT	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 391.92 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 391.92		
Full Name, Mailing Address, and ZIP Code CALVIN HELMICK 1619 SCHOOLHOUSE RD LANSING MI 48917-1458	Name of Employer RITE AID CORPORATION Occupation 01-MARKET MANAGER	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 225.69 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 225.69		
Full Name, Mailing Address, and ZIP Code DANIEL HERMES 19 CHARISMA DR CAMP HILL PA 17011-1010	Name of Employer RITE AID CORPORATION Occupation 09660-SR CATEGORY MANAGER	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 324.24 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 324.24		
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

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NAME OF COMMITTEE (In Full) Rite Aid Political Action Committee					
Full Name, Mailing Address, and ZIP Code DENELDA HORTON 7818 PINE TREE LANE SE TURNER OR 87392		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 336.80 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 02-DISTRICT MANAGER			
		Aggregate Year-to-Date > \$ 336.80			
Full Name, Mailing Address, and ZIP Code EDWARD HUSHEN 2439 FAIRMOUNT AVE PHILADELPHIA PA 19130-2517		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 224.95 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 01-MARKET MANAGER			
		Aggregate Year-to-Date > \$ 224.95			
Full Name, Mailing Address, and ZIP Code CARL JACKSON 32 BROOKGREEN DR. HURRICANE WV 25526-9089		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 426.00 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 01-MARKET MANAGER			
		Aggregate Year-to-Date > \$ 426.00			
Full Name, Mailing Address, and ZIP Code SCOTT JOHNSON 1104 HOWELL RD. PURVIS MS 39475-3542		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 306.94 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 02-DISTRICT MANAGER			
		Aggregate Year-to-Date > \$ 306.94			
Full Name, Mailing Address, and ZIP Code BETH KAPLAN General Delivery Stephenson MD 21153		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 660.00 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation EXECUTIVE V.P.			
		Aggregate Year-to-Date > \$ 660.00			
Full Name, Mailing Address, and ZIP Code CHARLES KIBLER 120 Woodridge Park Harrisburg PA 17110		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 900.00 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation SENIOR V.P.			
		Aggregate Year-to-Date > \$ 900.00			
Full Name, Mailing Address, and ZIP Code GARY KINCEL P.O. Box 549 Camp Hill PA 17011		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 510.00 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation VICE PRESIDENT			
		Aggregate Year-to-Date > \$ 510.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	8 / 21
			FOR LINE NUMBER 11A1

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

Full Name, Mailing Address, and ZIP Code WILLIAM KNEIVEL 115 Bramblewood Lane Lewisberry PA 17339 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 240.00	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 240.00 BI-WKLY P/R DED
Full Name, Mailing Address, and ZIP Code NICHOLAS KOMOCIN 3440 N. 48TH AVE HOLLYWOOD FL 33021-2407 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation 01-MARKET MANAGER Aggregate Year-to-Date > \$ 221.07	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 221.07 BI-WKLY P/R DED
Full Name, Mailing Address, and ZIP Code MARK KOSAKOWSKI 40 BOWDOIN ST HOULTOND ME 04730-1822 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation 02-DISTRICT MANAGER Aggregate Year-to-Date > \$ 324.49	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 324.49 BI-WKLY P/R DED
Full Name, Mailing Address, and ZIP Code JAMES KRAHULEC 781 Dogwood Terrace Bolling Springs PA 17007 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 360.00	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 360.00 BI-WKLY P/R DED
Full Name, Mailing Address, and ZIP Code FRANK KRAKE 1233 LAKE POINT VIST HOOVER AL 35244-1490 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation 01-MARKET MANAGER Aggregate Year-to-Date > \$ 213.72	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 213.72 BI-WKLY P/R DED
Full Name, Mailing Address, and ZIP Code LYNN LAYNE 15635 RANCHO VIEJO DR RIVERSIDE CA 92506 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation 78-WU PHARMACY MANAGER Aggregate Year-to-Date > \$ 265.82	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 265.82 BI-WKLY P/R DED
Full Name, Mailing Address, and ZIP Code JOHN LEARISH 1107 TUNBRIDGE LANE MECHANICSBURG PA 17055 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RITE AID CORPORATION Occupation 09824-DIRECTOR Aggregate Year-to-Date > \$ 299.29	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 299.29 BI-WKLY P/R DED

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	9 / 21
				FOR LINE NUMBER	11A1
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					
Full Name, Mailing Address, and ZIP Code WAYNE LECLAIR 117 GREENBRIER LANE DILLSBURG PA 17019-1317		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 253.80 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation		Aggregate Year-to-Date > \$ 253.80	
Full Name, Mailing Address, and ZIP Code JAMES LOTT 1956 Lambs Gap Road Mechanicsburg PA 17055		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 240.00 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation VICE PRESIDENT		Aggregate Year-to-Date > \$ 240.00	
Full Name, Mailing Address, and ZIP Code GARY MANSUY 618 COPPER CIRCLE LEWISBERRY PA 17330		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 206.15 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 09820-DIRECTOR MERCHANDISORS		Aggregate Year-to-Date > \$ 206.15	
Full Name, Mailing Address, and ZIP Code PHILIP MARKOVITZ 1 Laurel Ridge Road Hershey PA 17033		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 475.44 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation SENIOR V.P.		Aggregate Year-to-Date > \$ 475.44	
Full Name, Mailing Address, and ZIP Code JAMES MASTRIAN 60 E. Juniper Lane Moreland Hills OH 44022		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 1776.84 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Executive VP		Aggregate Year-to-Date > \$ 1776.84	
Full Name, Mailing Address, and ZIP Code PATRICK MC BRIDE 207 ATWOOD DRIVE CROWLEY LA 70526-0905		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 227.03 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 78-N/D PHARMACY MANAGER		Aggregate Year-to-Date > \$ 227.03	
Full Name, Mailing Address, and ZIP Code RAYMOND MCKEEBY 202 Spring Hill Lane Lebanon PA 17042		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 240.00 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation VICE PRESIDENT		Aggregate Year-to-Date > \$ 240.00	
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A		ITEMIZED RECEIPTS		10 / 21
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 11A1
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				
Full Name, Mailing Address, and ZIP Code MARK MILLER 1000 SW VISTA NE #806 PORTLAND OR 97205	Name of Employer RITE AID CORPORATION	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 240.00 BI-WKLY P/R DED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation 01-MARKET MANAGER	Aggregate Year-to-Date > \$ 240.00		
Full Name, Mailing Address, and ZIP Code RONALD MILLER 439 Country Line Road York Springs PA 17372	Name of Employer RITE AID CORPORATION	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 423.06 BI-WKLY P/R DED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation SENIOR V.P.	Aggregate Year-to-Date > \$ 423.06		
Full Name, Mailing Address, and ZIP Code JOHN MULLEN 1247 BELMONT DR LIBRARY PA 15129-8887	Name of Employer RITE AID CORPORATION	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 224.95 BI-WKLY P/R DED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation 01-MARKET MANAGER	Aggregate Year-to-Date > \$ 224.95		
Full Name, Mailing Address, and ZIP Code NEIL NGUYEN 148 NROWAY LANE LEBANON PA 17042-9003	Name of Employer RITE AID CORPORATION	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 203.55 BI-WKLY P/R DED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation 79-N/U PHARMACIST	Aggregate Year-to-Date > \$ 203.55		
Full Name, Mailing Address, and ZIP Code TIMOTHY NOONAN 1024 Waterford Way Mechanicsburg PA 17055	Name of Employer RITE AID CORPORATION	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 1800.00 BI-WKLY P/R DED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation PRESIDENT	Aggregate Year-to-Date > \$ 1800.00		
Full Name, Mailing Address, and ZIP Code MICHAEL PODGURSKI 1125 West Powderhorn Road Mechanicsburg PA 17011	Name of Employer RITE AID CORPORATION	Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 480.00 BI-WKLY P/R DED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation DIR, PHARM DEV	Aggregate Year-to-Date > \$ 480.00		
Full Name, Mailing Address, and ZIP Code RUKAIYA RIZVI 124 DARRAH LANE LAWRENCEVILLE NJ 08648-0000	Name of Employer RITE AID CORPORATION	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 277.30 BI-WKLY P/R DED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation 79-N/U PHARMACIST	Aggregate Year-to-Date > \$ 277.30		
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	11 / 21
				FOR LINE NUMBER 11A1	
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NAME OF COMMITTEE (In Full) Rite Aid Political Action Committee					
Full Name, Mailing Address, and ZIP Code PAUL ROBICHAUD 125 MAIN STREET NEW MARKET NH 03857-1640		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 215.41 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 01-MARKET MANAGER		Aggregate Year-to-Date > \$ 215.41	
Full Name, Mailing Address, and ZIP Code ROBIN SCHIFFMILLER 325 E MEADOW DR. MECHANICSBURG PA 17055-5108		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 340.67 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 09624-DIRECTOR		Aggregate Year-to-Date > \$ 340.67	
Full Name, Mailing Address, and ZIP Code TIMOTHY SEARS 16 OLD BROOK RD SPRINGFIELD MA 01118-1410		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 254.28 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 09802-REAL ESTATE DIRECTOR		Aggregate Year-to-Date > \$ 254.28	
Full Name, Mailing Address, and ZIP Code JON SHEARER 32857 QUINTICO CRK RD HEBRON MD 21830-2118		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 218.68 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 79-N/U PHARMACIST		Aggregate Year-to-Date > \$ 218.68	
Full Name, Mailing Address, and ZIP Code ROBERT SILSBY 8241 Oakway Lane Mechanicsburg PA 17055		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 504.00 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation VICE PRESIDENT		Aggregate Year-to-Date > \$ 504.00	
Full Name, Mailing Address, and ZIP Code KENNETH SIMMONS 4659 Hunters Lane Lewisburg PA 17339		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 480.00 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation VICE PRESIDENT		Aggregate Year-to-Date > \$ 480.00	
Full Name, Mailing Address, and ZIP Code ERIC BORKIN 1770 Meadow Drive Mechanicsburg PA 17055		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 600.00 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation VICE PRESIDENT		Aggregate Year-to-Date > \$ 600.00	
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	12 / 21
					FOR LINE NUMBER 11A1
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NAME OF COMMITTEE (In Full) Rite Aid Political Action Committee					
Full Name, Mailing Address, and ZIP Code ROBERT SOUDER 108 Lewisbury Road Mechanicsburg PA 17055		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 360.00 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation SENIOR V.P.		Aggregate Year-to-Date > \$ 360.00	
Full Name, Mailing Address, and ZIP Code Joseph Speaker P.O. Box 3185 Harrisburg PA 17105		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 360.00 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation SR. VICE PRESIDENT		Aggregate Year-to-Date > \$ 360.00	
Full Name, Mailing Address, and ZIP Code GARY STEIN 118 TIMBERVIEW DR TROY MI 48064-1741		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 609.21 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation VP REAL ESTATE		Aggregate Year-to-Date > \$ 609.21	
Full Name, Mailing Address, and ZIP Code SUZANNE SUTER-LOWE 9099 MANDORWOOD DRIVE LAUREL MD 20725-1391		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 211.76 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 78-N/U PHARMACY MANAGER		Aggregate Year-to-Date > \$ 211.76	
Full Name, Mailing Address, and ZIP Code WILLIAM TITELMAN 1808 Fox Hunt Lane Harrisburg PA 17110		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 1730.76 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation EXECUTIVE V.P.		Aggregate Year-to-Date > \$ 1730.76	
Full Name, Mailing Address, and ZIP Code LLOYD TOOMBS 20320 VIA MANRESA YORBA LINDA CA 92886		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 275.08 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 01-MARKET MANAGER		Aggregate Year-to-Date > \$ 275.08	
Full Name, Mailing Address, and ZIP Code CARL TYMAN 2311 N FRONT ST#PH-6 HARRISBURG PA 17011		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 330.42 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 09854-SENIOR DIRECTOR ADMIN		Aggregate Year-to-Date > \$ 330.42	
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	13 / 21
				FOR LINE NUMBER	11A1
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NAME OF COMMITTEE (In Full) Rite Aid Political Action Committee					
Full Name, Mailing Address, and ZIP Code GREGORY WEBB Wood Thrust Way Hummelstown PA 17036		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 504.00 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation VICE PRESIDENT			
		Aggregate Year-to-Date > \$ 504.00			
Full Name, Mailing Address, and ZIP Code MARK WHITE 27 SUNFIRE AVE. CAMP HILL PA 17011-1019		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 147.30 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 09800A-VP STORE PLANNING			
		Aggregate Year-to-Date > \$ 147.30			
Full Name, Mailing Address, and ZIP Code MARK WHITE 27 SUNFIRE AVE. CAMP HILL PA 17011-1019		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 403.83 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 09800A-VP STORE PLANNING			
		Aggregate Year-to-Date > \$ 551.13			
Full Name, Mailing Address, and ZIP Code KENT WHITING 8253 STIRRUP CT HARRISBURG PA 17111		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 946.20 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation SENIOR V.P.			
		Aggregate Year-to-Date > \$ 946.20			
Full Name, Mailing Address, and ZIP Code EVERETT WILKERSON 637 ELMWOOD STREET SHREVEPORT LA 71104-4901		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 325.00 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 03-PHARMACY DEVELOPMENT MGR			
		Aggregate Year-to-Date > \$ 325.00			
Full Name, Mailing Address, and ZIP Code TERRI WILLIAMS 1165 BECCA LANE NAPOLEON OH 43545-2275		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1999	Amount of Each Receipt this Period 218.38 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 01-MARKET MANAGER			
		Aggregate Year-to-Date > \$ 218.38			
Full Name, Mailing Address, and ZIP Code WILLIAM WOLFE 5622 PINEHURST WAY MECHANICSBURG PA 17055		Name of Employer RITE AID CORPORATION		Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 300.00 BI-WKLY P/R DED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation 09831-DIRECTOR			
		Aggregate Year-to-Date > \$ 300.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					34387.05

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	14 / 21
			FOR LINE NUMBER 16

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

Full Name, Mailing Address, and ZIP Code Friends of Connie Mack PO Box 23264 Tampa FL 33623	Name of Employer	Date (month, day, year) 06/15/1998 Returned by candidate Ck #889	Amount of Each Receipt this Period 1000.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		

Full Name, Mailing Address, and ZIP Code Friends of Jim McDermott 1810 E. Lynn Street Seattle WA 98112	Name of Employer	Date (month, day, year) 06/15/1999 Returned by Candidate Ck #874	Amount of Each Receipt this Period 500.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		

Full Name, Mailing Address, and ZIP Code Friends of Phil Gramm PO Box 565087 Dallas TX 75356	Name of Employer	Date (month, day, year) 06/15/1998 Returned by candidate Ck #893	Amount of Each Receipt this Period 1000.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		

Full Name, Mailing Address, and ZIP Code Portman for Congress PO Box 2365 Cincinnati OH 45201	Name of Employer	Date (month, day, year) 06/15/1999 Returned by Candidate Ck #835	Amount of Each Receipt this Period 1000.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		

SUBTOTALS of Receipts This Page (Optional)	
TOTALS This Period (last page this line number only)	3500.00

SCHEDULE B		ITEMIZED DISBURSEMENTS		17 / 21
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 23
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NAME OF COMMITTEE (In Full) Rite Aid Political Action Committee				
Full Name, Mailing Address, and ZIP Code Frist 2000 4205 Hillsboro Road Suite 306 Nashville TN 37215	Purpose of Disbursement (Senate - TN -) Contribution / Check #5007 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/07/1998	Amount of Each Disbursement This Period 2000.00	
Full Name, Mailing Address, and ZIP Code Friends of Conrad Burns P.O. Box 1532 Billings MT 59103	Purpose of Disbursement (Senate - MT -) Contribution / Check #5025 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/10/1998	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code FRIENDS OF CONNIE MORELLA FOR CONGRESS COMMITTEE 7101 WISCONSIN AVE SUITE 102 BETHESDA MD 20814	Purpose of Disbursement (House - MD - 08) Contribution / Check #5026 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/10/1998	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code FLETCHER FOR CONGRESS PO BOX 4703 LEXINGTON KY 40544	Purpose of Disbursement (House - KY - 06) Contribution / Check #5031 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/10/1998	Amount of Each Disbursement This Period 2000.00	
Full Name, Mailing Address, and ZIP Code FEINSTEIN 2000 905 MONTGOMERY STREET SUITE 400 SAN FRANCISCO CA 54133	Purpose of Disbursement (Senate - CA - 00) Contribution / Check #5033 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/10/1998	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code DEDICATED AMERICANS FOR THE SENATE AND THE HOUSE PAC(DASH PAC) 424 C STREET NE WASHINGTON DC 20002	Purpose of Disbursement (Senate - CA - 00) Contribution / Check #5022 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/08/1998	Amount of Each Disbursement This Period 2500.00	
Full Name, Mailing Address, and ZIP Code Brian Bilbray for Congress 970 Seacoast Drive Imperial Beach CA 91931	Purpose of Disbursement (House - OH - 18) Contribution / Check #5029 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/10/1998	Amount of Each Disbursement This Period 2000.00	
Full Name, Mailing Address, and ZIP Code BOB NEY FOR CONGRESS PO BOX 430 ST CLAIRSVILLE OH 43950	Purpose of Disbursement (House - OH - 18) Contribution / Check #5032 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/10/1998	Amount of Each Disbursement This Period 2000.00	
Full Name, Mailing Address, and ZIP Code Bob Kerrey for U.S. Senate Committee 301 4th Street NE Suite 201 Washington DC 20002	Purpose of Disbursement (House - OH - 18) Contribution / Check #1016 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 03/15/1998	Amount of Each Disbursement This Period 1000.00	
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE B		ITEMIZED DISBURSEMENTS		18 / 21
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 23
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NAME OF COMMITTEE (In Full) Rite Aid Political Action Committee				
Full Name, Mailing Address, and ZIP Code Bob Kerrey for U.S. Senate 3412 P Street NW Washington DC 20007	Purpose of Disbursement (Senate - NE -) Contribution / Check #5020	Date (month, day, year) 05/10/1998	Amount of Each Disbursement This Period 1000.00	
Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :				
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)				28000.00

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	19 / 21
			FOR LINE NUMBER 28

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

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Unity '99 Weinberg for Mayor Committee 1230 Walnut Street Philadelphia PA 19107	Contribution / Check #5003 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/29/1998	2500.00
Tombin for Senate Capitol Building Room 227-M Charleston WV 25305	Contribution / Check #1020 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/16/1998	1000.00
The Ridge Leadership Fund PO Box 11887 Harrisburg PA 17108	Contribution / Check #5034 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	06/10/1998	10000.00
The Friends of John Street City Hall Room 454 City of Philadelphia Philadelphia PA 19107	Contribution / Check #5002 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/29/1998	2500.00
Sam Katz for Mayor Lewis Tower Building 225 South 15th Street Philadelphia PA 19102	Contribution / Check #5001 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/29/1998	2500.00
Salvatore for Senate 1154 Norwalk Road Philadelphia PA 19115	Contribution / Check #1012 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	02/12/1998	500.00
Re-elect Councilman at Large David Cohen 5635 N. 18th Street Philadelphia PA 19141	Contribution / Check #5008 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	04/29/1998	500.00
People for Dawida 333 Forbes Avenue Pittsburgh PA 15222	Contribution / Check #5019 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	04/30/1998	250.00
Pennsylvania Republican State Committee 1205 Locust Street Suite 100 Philadelphia PA 19107	Contribution / Check #5028 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	06/10/1998	1000.00

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE B		ITEMIZED DISBURSEMENTS		20 / 21
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 28
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NAME OF COMMITTEE (In Full) Rite Aid Political Action Committee				
Full Name, Mailing Address, and ZIP Code Onorato for County Controller PO Box 6422 Pittsburgh PA 15212	Purpose of Disbursement Contribution / Check #5017 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/30/1998	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code Nutter '99 PO Box 15506 Philadelphia PA 19131	Purpose of Disbursement Contribution / Check #5011 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/29/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code John White, Jr. for Mayor PO Box 58503 Philadelphia PA 19102	Purpose of Disbursement Contribution / Check #5004 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 03/29/1998	Amount of Each Disbursement This Period 2500.00	
Full Name, Mailing Address, and ZIP Code John Streef for Mayor 1321 Arch Street Philadelphia PA 19107	Purpose of Disbursement Contribution / Check #5036 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/25/1998	Amount of Each Disbursement This Period 5000.00	
Full Name, Mailing Address, and ZIP Code Friends of Mike Fisher Committee 11 Stanwix Street 15th Floor Pittsburgh PA 15222	Purpose of Disbursement Contribution / Check #5027 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/10/1998	Amount of Each Disbursement This Period 2500.00	
Full Name, Mailing Address, and ZIP Code Friends of Marian B. Tasco 8325 Stenton Avenue Philadelphia PA 19150	Purpose of Disbursement Contribution / Check #5013 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/29/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Friends of Marian B. Tasco 123 South Broad Street 29th Floor Philadelphia PA 19109	Purpose of Disbursement Contribution / Check #1011 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/08/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Friends of John Barley 37 Chestnut Grove Road Conestoga PA 17516	Purpose of Disbursement Contribution / Check #1013 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/26/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Friends of Janine L. Blackwell PO Box 40834 Philadelphia PA 19107	Purpose of Disbursement Contribution / Check #5015 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/29/1998	Amount of Each Disbursement This Period 500.00	
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE B		ITEMIZED DISBURSEMENTS		21 / 21
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 28
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NAME OF COMMITTEE (In Full) Rite Aid Political Action Committee				
Full Name, Mailing Address, and ZIP Code Friends of Dwight Evans P.O. Box 19097 Philadelphia PA 19130	Purpose of Disbursement Contribution / Check #5000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 03/29/1998	Amount of Each Disbursement This Period 2500.00	
Full Name, Mailing Address, and ZIP Code Friends of Donna Reed-Miller 5653 Germantown Avenue Philadelphia PA 19144	Purpose of Disbursement Contribution / Check #5012 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/29/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Friends of Bob O'Connor 5670 Phillips Avenue Pittsburgh PA 15217	Purpose of Disbursement Contribution / Check #5018 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/30/1998	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code Friends of Angel Ortiz PO Box 40831 Philadelphia PA 19107	Purpose of Disbursement Contribution / Check #5014 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/29/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Frank Rizzo Committee '99 PO Box 58877 Philadelphia PA 19102	Purpose of Disbursement Contribution / Check #5010 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/29/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Commonwealth Leadership PAC 717 N. Second Street Harrisburg PA 17102	Purpose of Disbursement Contribution / Check #1014 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 03/01/1998	Amount of Each Disbursement This Period 1170.00	
Full Name, Mailing Address, and ZIP Code Committee to Re-elect Anna C. Verna 1951 Ribner Street 2nd Floor Philadelphia PA 19145	Purpose of Disbursement Contribution / Check #5008 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/29/1998	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code Chris Holden for Mayor 500 N. Lake Avenue Pasadena CA 91104	Purpose of Disbursement Contribution / Check #1008 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 01/22/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code AFL-CIO COPE Fund 230 State Street Harrisburg PA 17101	Purpose of Disbursement Contribution / Check #1010 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 01/29/1998	Amount of Each Disbursement This Period 1000.00	
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)			41420.00	