

RITE AID CORPORATION Financial EDI/EC Trading Partner Profile

		Date Completed:
Con	npany Name:	
Add	ress:	
City	:	State: Zip:
FEDI Bus. Contact:		
Title	:	
Phone:		Fax:
FEDI Tech Contact:		
Title:		
Phone:		Fax:
1.	Does your compa (FEDI)? Check a	ny receive payment and/or remittance from other organizations via Financial EDI Il that apply:
	Payment	Remittance Neither (Plan to support)
2.	Indicate the methors your trading partn	od and data format by which you receive electronic remittance information from ers:
	Bundled to	bank with payment and remittance
	Split with pa	yment to bank and remittance to VAN
3.	Does your Compa	any support Version 4010 of the EDI Standards? Yes No
4.	Would you prefer	to receive remittance in advance of payment? Yes No
5.	Do you have a for	mal FEDI Trading Partner Agreement? Yes No
6.	Please indicate if	there are FEDI terms offered? Yes (please attach) No
<u>Please Fax/Email This Form To The EDI/B2BDept. at 717-975-8623 and send the original to</u> <u>Rite Aid Treasury Department, 200 Newberry Commons, Etters, PA. 17319. This Request</u>		

Must Be Approved By Accounting and Treasury Department.

RETURN COMPLETED PROFILE TO: RITE AID CORPORATION EDI/EC DEPARTMENT PO BOX 3165 HARRISBURG PA 17105 FAX: (717) 975-8623