



300 Cedar Ridge Drive
Suite 310
Pittsburgh, PA 15205

Claim Number: CC171355

Date: 2/1/2017

Audit Year: FY2017

Vendor #: 37508

Claim Code: 517-7

RECKITT BENCKISER

Attn: Shannon Gilles

PO BOX 088159

CHICAGO, IL 606951159

Fax# /Email: Shannon.Gilles@rb.com

Claim Reason

Event Planning/Coupons - Movement Missed

Claim Description

To recover additional scandown allowance. Not all sale items were included in the original billing for this Markdown event. See attached schedule and backup.

Total Amount: **\$766.25**

Auditor: Russell Stockhaus

Email: russell.stockhaus@connolly.com

Phone: 203-423-1212

Fax: 203-423-1725

Approval _____ **Date:** _____

Please find the enclosed claim(s) from our most recent audit at Rite Aid Corporation for your review. All relevant documentation is attached.

When responding to this claim, you must provide a complete response addressing all issues within 30 days of receipt of this package. This response must include approval or disapproval of each item on the claim, plus any valid documentation supporting your position. Per instructions from management of Rite Aid's accounts payable department, any claims not completely addressed in your response will be deducted from the next remittance without exception.





INCORRECT POS BILLBACK

INCORRECT PRICING

EVENTS

GNSL20160228055

Contract# 0714281

Period - 02/28/2016 04/21/2016

37508 - RECKITT BENCKISER

Orig ItmNbr	ItmNbr	ItmDesc	Cost	Markdown Pct	Original Billing			Revised Billing		
					Qty	Scan Amt	AR Deduct	Updated Scan Amt	Total Qty	Revised Amt Due
0367425	0367425	AIRBORNE IMMUNE+ CAPS 60C	\$9.09	75%				\$7.50	106	\$795.00
0367425	0367425	AIRBORNE IMMUNE+ CAPS 60C	\$9.09	50%				\$7.50	2,196	\$16,470.00
0367425	0367425	AIRBORNE IMMUNE+ CAPS 60C	\$9.09	25%				\$3.75	52	\$195.00
0367425	0367425	AIRBORNE IMMUNE+ CAPS 60C	\$9.09	<25%				\$0.00	0	\$0.00
					2,251	\$7.50	\$16,882.50		2,354	\$17,460.00
0370668	0370668	MEGARED SUPER COQ10 40CT	\$20.99	75%				\$17.50	149	\$2,607.50
0370668	0370668	MEGARED SUPER COQ10 40CT	\$20.99	50%				\$17.50	1,499	\$26,232.50
0370668	0370668	MEGARED SUPER COQ10 40CT	\$20.99	25%				\$8.75	4	\$35.00
					1,611	\$17.50	\$28,192.50		1,652	\$28,875.00
Totals -					3,862		\$45,075.00		4,006	\$46,335.00

ArNbr	ArDte	AR Deduction Amt
0714280	5/16/2016	\$493.75
0714281	5/16/2016	\$45,075.00

Revised Amt Due: \$46,335.00

AR Deduction: \$45,568.75

Balance Due: \$766.25



R/F#: 0032-4180

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RITE AID
30 HUNTER LANE
CAMP HILL, PA 17011

MAILING ADDRESS: PO BOX 3165
HARRISBURG, PA 17105
A/P ACCOUNTING & ANALYSIS

ATTENTION:

INVOICE DATE: 05/16/2016

INVOICE NUMBER: 37508-0714280

RECKITT BENCKISER
K.CALICIOTTI, MORRIS CORP IV
399 INTERPACE PKWY
PARSIPPANY, NJ 07054

PLEASE REFER TO INVOICE NUMBER IN ALL CORRESPONDENCE
BASED ON PREVIOUS PAYMENT HISTORY, THE INVOICE AMOUNT
WILL BE DEDUCTED WITHIN 1-30 DAYS IF NOT PAID IN FULL

<u>CHARGE TYPE</u>	<u>AMOUNT INVOICED</u>
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STORE MARKDOWN	\$493.75
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BALANCE DUE: PLEASE PAY THIS AMOUNT:	\$493.75
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CONTRACT NBR: 0714280 XREF NBR: 0714280

Notes:



INVOICE NUMBER: 0714280

VENDOR NAME: RECKITT BENCKISER

R/F#: 0032-4180

CONTRACT NUMBER: 0714280

VENDOR NUMBER: 37508

Event ID: GNSL20160228054

Event Description: 25% 2016 Vitamin Funded

Item Number	Item Description	Allowance Amount	Units	Total	Note
0367425	AIRBORNE IMMUNE+ CAPS 60CT	3.75	99	371.25	POI Effective as of 2016-04-22
0370668	MEGARED SUPER COQ10 40CT	8.75	14	122.50	POI Effective as of 2016-04-22
			113	493.75	



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RiteAid Incremental Investment
Agreement
Fiscal Year 2017 Supplier
Participation

Contract # 0714280

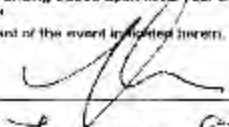
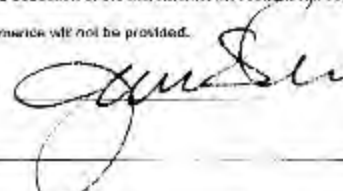
Page 1 of 1



Vendor #: 37508 Vendor Name: RECKITT BENCKISER Category Mgr: DIANE OBER
Billing Address: K. CALICIOTTI, MORRIS CORP
IV
399 INTERPACE PKWY
PARSIPPANY NJ 07054
Contact: Taylor Stazzone Phone: -- Fax#: -- Event Dates: 2/28/2016 - 5/9/2016
Email: taylor.stazzone@rb.com
Event Type: DISCONTINUED MARKDOWN Contract Desc: 25% off retail MD

Item #'s	Item Description	Size	Cost	Investment/Funding	Special Direction/Additional Remarks
0587425	AIRBORNE IMMUNE+ CAPS 80CT	1	\$8.09	\$3.75	
0370008	MEGARED SUPER COQ10 40CT	1	\$20.89	\$8.75	

RECKITT BENCKISER Supplier hereby agrees to participate in the Rite Aid events, including Rite Aid Online Store, and associated costs indicated herein. This includes but not limited to, rain checks issued by Rite Aid during the term of the Agreement that are later redeemed. Supplier also hereby agrees to maintain margin coverage in the event of any price increases between the execution of this Agreement and event completion dates. Supplier further agrees that similar items added to any program after the Agreement is executed, but prior to event completion may be included in an event. The amount to be paid by Supplier is in addition to and not in substitution for or diminution of any Minimum Promotional Funding based upon fiscal year 2017 (February 28, 2016 February 26, 2017) gross purchases. Payments and deduction of the incremental investment will occur within 30 days of the commencement of the event indicated herein. Incremental investment funding is firm and non-cancelable. Proof of performance will not be provided.

Authorized Signature:  Category Mgr./Assoc. Category Mgr.: 
Printed Name: Taylor Stazzone Printed Name:
Date: 2-12-16 Date:
UC



R/F#: 0032-4181

RITE AID
30 HUNTER LANE
CAMP HILL, PA 17011

MAILING ADDRESS: PO BOX 3165
HARRISBURG, PA 17105
A/P ACCOUNTING & ANALYSIS

ATTENTION:

INVOICE DATE: 05/16/2016

INVOICE NUMBER: 37508-0714281

RECKITT BENCKISER
K.CALICIOTTI, MORRIS CORP IV
399 INTERPACE PKWY
PARSIPPANY, NJ 07054

PLEASE REFER TO INVOICE NUMBER IN ALL CORRESPONDENCE
BASED ON PREVIOUS PAYMENT HISTORY, THE INVOICE AMOUNT
WILL BE DEDUCTED WITHIN 1-30 DAYS IF NOT PAID IN FULL

<u>CHARGE TYPE</u>	<u>AMOUNT INVOICED</u>
STORE MARKDOWN	\$45,075.00
BALANCE DUE: PLEASE PAY THIS AMOUNT:	\$45,075.00

CONTRACT NBR: 0714281 XREF NBR: 0714281

Notes:



INVOICE NUMBER: 0714281

VENDOR NAME: RECKITT BENCKISER

R/F#: 0032-4181

CONTRACT NUMBER: 0714281

VENDOR NUMBER: 37508

Event ID: GNSL20160228055

Event Description: 50% 2016 Vitamin Funded

Item Number	Item Description	Allowance Amount	Units	Total	Note
0367425	AIRBORNE IMMUNE+ CAPS 60CT	7.50	2,251	16,882.50	POI Effective as of 2016-04-22
0370668	MEGARED SUPER COQ10 40CT	17.50	1,611	28,192.50	POI Effective as of 2016-04-22
			3,862	45,075.00	



RiteAid Incremental Investment
Agreement
Fiscal Year 2017 Supplier
Participation

Contract # 0714281

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Vendor #: 37608 Vendor Name: RECKITT BENCKISER Category Mgr: DIANE OBER
Billing Address: K.CALICIOTTI, MORRIS CORP
IV
398 INTERPACE PKWY
PARSIPPANY NJ 07054
Contact: Taylor Stazzone Phone: - - Fax#: - - Event Dates: 2/28/2016 - 5/9/2016
Email: taylor.stazzone@rb.com
Event Type: DISCONTINUED MARKDOWN Contract Desc: 50% off retail MD

Item #'s	Item Description	Size	Cost	Investment/Funding	Special Direction/Additional Remarks
0367426	AIRBORNE IMMUNE+ CAPS 80CT	1	\$9.09	\$7.50	
0370668	MEGARED SUPER CDQ10 40CT	1	\$20.99	\$17.50	

RECKITT
BENCKISER

Supplier hereby agrees to participate in the Rite Aid events, including Rite Aid Online Store, and associated costs indicated herein. This includes but not limited to, coin checks issued by

Rite Aid during the term of the Agreement that are later refunded. Supplier also hereby agrees to maintain margin coverage in the event of any price increases between the execution of this

Agreement and event completion dates. Supplier further agrees that similar items added to any planogram after the Agreement is executed, but prior to event completion may be included in an event. The amount to be paid by Supplier is in addition to and not in substitution for or deduction of any Minimum

Promotional Funding based upon fiscal year 2017 (January 28, 2016 - January 25, 2017) gross purchases. Payments and deduction of the incremental investment will occur within 30 days of the commencement of the event indicated herein. Incremental investment funding is firm and non-cancelable. Proof of performance will not be provided.

Authorized
Signature:

Category Mgr/Asso. Category
Mgr:

Printed
Name:

Printed
Name:

Date:

Date: