



Value Drug Company

P.O. BOX 2448, ONE GOLF VIEW DRIVE  
ALTOONA, PENNSYLVANIA 16603  
(814) 944-9316  
WATS (800) 252-3786  
FAX (814) 944-9553

**REGISTRATION STATEMENT  
UNDER 29 CFR 2520.104-23(b)**

2520040764813

The undersigned hereby files the following statement in accordance with 29 CFR 2520.104-23(b) as of the date shown below as an alternative form of compliance with the reporting and disclosure requirements of part 1 of Title 1 of ERISA of 1974:

1. Name of Employer: Value Drug Company  
Address: P.O. Box 2448  
Altoona, Pennsylvania 16603
2. EIN of Employer: 23-1179140
3. Declaration: The Employer listed above maintains a plan for the purpose of providing deferred compensation for a select group of management or highly compensated employees
4. Number of Plans and Number of Employees in Each Plan: One plan which covers three employees

JAN - 8 1993

Executed on this 21<sup>st</sup> day of December, 1992.

Value Drug Company

By R. E. Zyla V.P./KFO

21,211



Value Drug Company

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Pension and Welfare Benefits Administration  
P.O. Box 75212  
Washington, D.C. 20013-5212

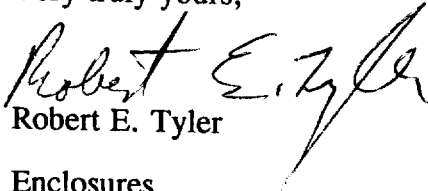
Re: Registration Statement Under 29 CFR 2520.104-23(b)

Dear Sir or Madam:

The enclosed registration statement is being filed with the Department under 29 CFR 2520.104-23(b) in accordance with the procedure outlined in 57FR 33019; July 24, 1992. Also enclosed is a \$1,000 check made payable to the U.S. Department of Labor.

I trust that this information is sufficient for you to complete your records. Feel free to contact me if you have any questions or comments.

Very truly yours,

  
Robert E. Tyler

Enclosures

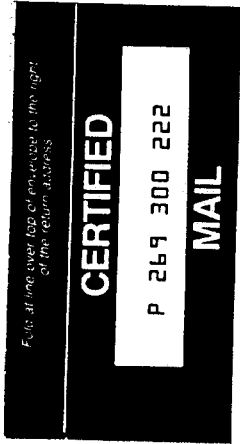
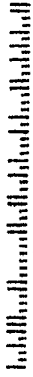
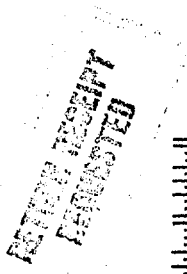
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Pension and Welfare Benefits Administration  
P.O. Box 75212  
Washington, D.C. 20013-5212



Place this label over top of envelope to the right  
of the return address.

**CERTIFIED**

P 269 300 222

**MAIL**