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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Computer Sciences Corporation PAC 3170 Fairview Park Dr. ADDRESS (number and street) (Check if address is changed) Falls Church 22042 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS cscpac@csc.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2013 C00101410 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Mr. Ralph Baker Type or Print Name of Treasurer Mr. Ralph Baker [Electronically Filed] 01 2013 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		COMMITTEE Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Compleinformation below.)	ete the candidate
Nam Can	e of didate		
	didate / Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Can	e of didate		
Par	ty Con	nmittee:	a managaratia
(d)		· · · · ·	emocratic, epublican, etc.) Party.
Poli	tical A	action Committee (PAC):	
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected organization is a
		X Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segronmittee. (i.e., nonconnected committee)	regated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	Δ		

FEC Form 1	(Revised 02/	2009)			Page 3
Write or Type Comm	_		_		
Computer	Scienc	ces Corporation PAC	<u> </u>		
6. Name of Any Co	nnected Org	anization, Affiliated Committee, Joint	Fundraising Representa	tive, or Leader	ship PAC Sponsor
Computer Scie	nces Cor	poration			
Mailing Address	3	170 Fairview Park Dr.			
	- F	Falls Church	VA	22042	
	_	CITY	STAT	 E	ZIP CODE
Relationship: X	Connected O	Organization Affiliated Committee	Joint Fundraising Repres	sentative Le	eadership PAC Sponsor
7. Custodian of Rec books and records		y by name, address (phone number o	optional) and position of tl	ne person in po	ossession of committee
Full Name	W.S. Elizabeti				
Mailing Address	٤	3170 Fairview Park Dr.			
	L				
	L	Falls Church	VA	22042	
Title or Position		CITY	STATE		ZIP CODE
Senior Manager			Telephone number	703 – _	641 - 2098
8. Treasurer: List the any designated ag		address (phone number optional) of the istant treasurer).	ne treasurer of the commi	ttee; and the n	ame and address of
Full Name of Treasurer	Mr. Ralph Bal	ker			
Mailing Address	[3	170 Fariview Park Dr.			
	L				
	LF	Falls Church	VA	22042	
Title or Position		CITY	STATE		ZIP CODE
NPS Chief Financ	cial		Telephone number	703	641 - 2465

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FEC FOI	III I (NEVISEU UZ/ZUUS)	raye 4
Full Name of Designated Agent		
Mailing Address		
		-
	CITY STATE	ZIP CODE
Title or Position	Telephone number	
	r Depositories: List all banks or other depositories in which the committee deposits funds, I	
safety deposit be Name of Bank,	oxes or maintains funds. Depository, etc. Wells Fargo Bank, N.A. P.O. Box 63020	
safety deposit bo	oxes or maintains funds. Depository, etc. Wells Fargo Bank, N.A. P.O. Box 63020	
safety deposit be Name of Bank,	oxes or maintains funds. Depository, etc. Wells Fargo Bank, N.A. P.O. Box 63020	
safety deposit be Name of Bank,	Depository, etc. Wells Fargo Bank, N.A. P.O. Box 63020	
safety deposit be Name of Bank,	Depository, etc. Wells Fargo Bank, N.A. P.O. Box 63020 San Francisco CITY STATE	63
safety deposit be Name of Bank, Mailing Address	Depository, etc. Wells Fargo Bank, N.A. P.O. Box 63020 San Francisco CITY STATE	63
safety deposit be Name of Bank, Mailing Address	Depository, etc. Wells Fargo Bank, N.A. P.O. Box 63020 San Francisco CITY STATE Depository, etc.	63
safety deposit be Name of Bank, Mailing Address	Depository, etc. Wells Fargo Bank, N.A. P.O. Box 63020 San Francisco CITY STATE Depository, etc.	63
safety deposit be Name of Bank, Mailing Address	Depository, etc. Wells Fargo Bank, N.A. P.O. Box 63020 San Francisco CITY STATE Depository, etc.	63

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: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F1A Transaction ID:

To update section 5e to properly reflect the classification of Lobbyist/Registrant PAC.

Form/Schedule: Transaction ID: