PAGE 1/4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Dell Inc. Employee Political Action Committee 1225 Eye Street, NW ADDRESS (number and street) Suite 300 (Check if address is changed) Washington 20005 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS pac@dell.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2012 C00369751 FEC IDENTIFICATION NUMBER 3. X OR IS THIS STATEMENT NEW (N) 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. Michael Young Type or Print Name of Treasurer Michael Young [Electronically Filed] 10 16 2012 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. FEC FORM 1 (Revised 06/2012)

	Office			For further information contact:
.	Use			Federal Election Commission
				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 y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	emocratic, epublican, etc.) Party.
Poli	itical 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	_abor 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 segrecommittee. (i.e., nonconnected committee)	egated 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 C	
	2.	FEC ID number	
	3.	FEC ID number	
	Δ		

FEC F 1 (Da :)	02/2000)	D 3
FEC Form 1 (Revised Write or Type Committee Nam		Page 3
	oyee Political Action Committee	Londorchin DAC Service
-	Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
Dell Inc.		
Mailing Address	One Dell Way	
	Round Rock TX	78682
	CITY STATE	ZIP CODE
Relationship: X Connecte	ed Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Relationship: X Connecte	ed Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
books and records.	entify by name, address (phone number optional) and position of the personal and position and position and position and position and personal an	on in possession of committee
Aprele Sr Full Name		
Mailing Address	1225 Eye St, NW	
	Suite 300	
	Washington	20005
Title or Position	CITY STATE	ZIP CODE
PAC Administrator	Telephone number	408 5549
8. Treasurer: List the name at any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and assistant treasurer).	the name and address of
Full Name Michael Y of Treasurer	/oung	
Mailing Address	1225 Eye Street, NW	
	Suite 300	
	Washington DC	20005
	CITY STATE	ZIP CODE
Title or Position Treasurer		_ 408 3355

TECTOM T (NO	evised 02/2009)	Page 4
Full Name of Designated Agent Reber	cca M.J. Gould	
Mailing Address	1225 Eye St, NW	
	Suite 300	
	Washington DC	
Title or Position Assistant Treasurer		202 408 - 3355
safety deposit boxes or Name of Bank, Deposito		posito fundo, notas accounto, fontes
safety deposit boxes or Name of Bank, Deposito	maintains funds.	
safety deposit boxes or Name of Bank, Deposito	maintains funds. ory, etc.	
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