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# FEC FORM 2
## STATEMENT OF CANDIDACY

SECRETARY OF THE SENATE
04 MAR 15 PM 12: 30

1. (a) Name of Candidate (in full)
John Thune

(b) Address (number and street) ☐ Check if address changed
2908 W 11th Street

2. Identification Number
S2SD00068

(c) City, State, and ZIP Code
Sioux Falls, SD 57104

3. Is This Statement New (N) OR X Amended (A)

4. Party Affiliation: Republican
5. Office Sought: U.S. Senate
6. State & District of Candidate: South Dakota

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2004 (year of election) election(s).

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)
John Thune for U.S. Senate

(b) Address (number and street)
P.O. 3308

(c) City, State, and ZIP Code
Sioux Falls, SD 57101

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES
(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)
Senate Majority Committee

(b) Address (number and street)
1155 21st Street, NW Suite 500

(c) City, State, and ZIP Code
Washington, DC 20036

### DECLARATION OF INTENT TO EXPEND PERSONAL FUNDS (House or Senate Only)

9. I intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) by

9A _____ for the primary election, and

9B _____ for the general election.

If you do not intend to expend personal funds exceeding the threshold amount for either election, you must enter "0.00" for each.

*I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.*

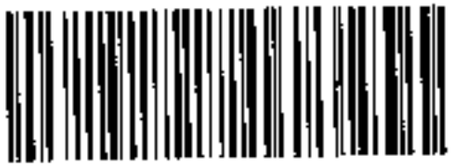
Signature of Candidate: John Thune
Date: 2/16/04

**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | | |

CERTIFIED MAIL

PO Box 3308
Sioux Falls, SD 57101-3308



7002 2410 0005 4664 7213

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RETURN RECEIPT
REQUESTED

Secretary of the Senate
Office of Public Records
232 Hart Senate Building
Washington, DC 20510

24020161325
24020161325

EMILY J. REYNOLDS
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, DC 20510-7118
PHONE: 202-224-0322

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

**THE PRECEDING DOCUMENT WAS:**

_____ **HAND DELIVERED** _____
**Date of Receipt**

✓ **REGISTERED/CERTIFIED MAIL** 03-01-04
**Postmarked**

_____ **RECEIVED FROM THE FEDERAL ELECTION COMMISSION** _____
**Date of Receipt**

_____ **OTHER (Specify):** _____
_____ **PRIORITY MAIL**
_____ **EXPRESS MAIL**
_____ **FEDERAL EXPRESS**
_____ **UPS**
_____ **AIRBORNE EXPRESS** _____
**Postmark and/or Date of Receipt**

_____ **FIRST CLASS MAIL** _____
**Postmarked**

_____ **FAX (48-HOUR NOTICES)**
_____ **FAX (FEC FORM #10 )**
_____ **FAX (CAMPAIGN REPORT)** _____
**Date of Receipt**

_____ **NO POSTMARK** _____ **POSTMARK ILLEGIBLE**

_____ **RECEIVED FROM THE LEGISLATIVE RESOURCE CENTER** _____
**Date of Receipt**

RD 03-15-04
**Preparer** **Date Prepared**

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