FEC FORM 2
STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Heather A. Wilson		
(b) Address (number and street) P.O. BOX 14070		2. Identification Number H8NM01174
(c) City, State and ZIP Code ALBUQUERQUE NM 87191-		3. Is This Statement X New (N) OR Amended (A)
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate NM 01

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)

HEATHER WILSON FOR CONGRESS

(b) Address (number and street)

P.O. BOX 14070

(c) City, State and ZIP Code

ALBUQUERQUE NM 87191-

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)

(b) Address (number and street)

(c) City, State and ZIP Code

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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. 400.8) by

9A	0.00	for the primary election, and
9B	0.00	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	Date
Heather A. Wilson	11/05/2003

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