FEC FORM 2
STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)
Stephanie Marie Herseth

(b) Address (number and street)
PO Box 2009

2. Identification Number
H2SD00092

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

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

4. Party Affiliation
DEMOCRATIC PARTY

5. Office Sought
House

6. State & District of Candidate
SD 1

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)
Herseth for Congress

(b) Address (number and street)
PO Box 2009

(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)
Frontline Democrats

(b) Address (number and street)
430 South Capitol Street, SE

(c) City, State and ZIP Code
Washington DC 20003

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
Stephanie Herseth	10/05/2004

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