

(Print or Type Responses)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL				
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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person * FRAUENFELDER LEWIS			te of Event Requiring ment (Month/Day/Year) 9/2004		3. Issuer Name and Ticker or Trading Symbol QUANTUM CORP /DE/ [DSS]				
(Last) (First) (Middle) 1650 TECHNOLOGY DRIVE, SUITE 800	02/09/2	2004		Issuer	f Reporting Person all applicable) 10% Owner	Filed(Mon	ndment, Date Original th/Day/Year)		
(Street) SAN JOSE, CA 95110			X_ Officer (give ti	tle Other (spec below) 1 Storage Devices	Applicable I _X_ Form fi	6. Individual or Joint/Group FilingCheck Applicable Line)X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person			
(City) (State) (Zip)		Table I - Non-Derivative Securities Beneficially Owned					wned		
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
DSS Common Stock			71,684		D				
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02) Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number. Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivati Security (Instr. 4)		Price of Derivative	Form of Ownership Derivative (Instr. 5) Security: Direct	*			
	Date Exercisable	Expiration Date	Title 1	Amount or Number of Shares	Security	(D) or Indirect (I) (Instr. 5)			

Reporting Owners

		Relationships			
Reporting Owner Name / Address		Director	10% Owner	Officer	Other
	FRAUENFELDER LEWIS 1650 TECHNOLOGY DRIVE, SUITE 800 SAN JOSE, CA 95110			SVP, GM Storage Devices	

Signatures

Lewis Frauenfelder	02/17/2004
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.