FORM 4

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

OMB APPRO	OVAL
OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN 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

		3)													
1. Name and Address of Reporting Person * COKER CHARLES W				2. Issuer Name and Ticker or Trading Symbol BANK OF AMERICA CORP /DE/ [BAC]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director				
(Last) (First) (Middle) SONOCO PRODUCTS COMPANY, NORTH SECOND STREET				3. Date of Earliest Transaction (Month/Day/Year) 09/22/2004						_	Officer (given	ve title below)	Oth	er (specify bel	ow)
(Street) HARTSVILLE, SC 29550				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person				
(City)	(State)	(Zip)			Table l	- Non-	Derivati	ive Securiti	es Acquire	d, Disposed	d of, or Ben	eficially Own	ed	
1.Title of S (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year)	2A. Deen Execution any (Month/I	n Date, it	Code (Instr	. 8)	(A)	ecurities Ac or Disposed tr. 3, 4 and 5 (A) or ount (D)	of (D) Ov Tr			ed (7. Nature of Indirect Beneficial Ownership (Instr. 4)
Reminder: I	xeport on a s	eparate fille for each	n class of securities	beneficial	ly owned	direct.		•							
Reminder: I	xeport on a s	eparate fine for each	Table II - 1	Derivativ	e Securi	ties Acc	Per con for quired,	rsons v ntained m disp Dispose	l in this fo lays a cur	rm are no rently vali neficially O	t required id OMB co	of inform to respon introl num	d unless the		1474 (9-02)
1. Title of	2. Conversion	3. Transaction	Table II - 1 (3A. Deemed Execution Date, if	Derivativ (e.g., puts 4. Transac Code	e Securi, calls, w 5. N Sec or I of (Jumber Derivati urities puired (Dispose D)	Per conformulation for some second of the conformulation for second of the conformation for s	rsons ventained m disp Dispose is, convente Exer	I in this foolays a cured of, or Berertible securisable on Date	rm are no rently vali neficially O	t required id OMB co Owned d Amount ying	to respondentrol num	d unless the	f 10. Owners Form of Derivati Security Direct (or Indire	11. Nature of Indire Benefici over of Unite (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction	Table II - (3A. Deemed Execution Date, if	Derivativ (e.g., puts 4. Transac Code	e Securi , calls, w tion of 1 Secor I of ((Ins	ties Acc arrant: Jumber Derivati urities quired (. Dispose D) ttr. 3, 4,	Per conformulation for	rsons v ntained m disp Dispose ns, conv ate Exer Expirati nth/Day	d in this fo lays a cur d of, or Ber ertible securcisable on Date //Year)	rm are no rently vali neficially O rrities) 7. Title and of Underly Securities	t required id OMB co Owned d Amount ying	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially Owned Following Reported	f 10. Owners Form of Derivati Security Direct (or Indire	11. Nature of Indire Beneficity Owners! (Instr. 4

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
COKER CHARLES W SONOCO PRODUCTS COMPANY NORTH SECOND STREET HARTSVILLE, SC 29550	X					

Signatures

Charles W. Coker/Roger C. McClary POA	09/23/2004
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(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).
- (1) Phantom stock units may be settled in cash upon death or termination of service as a director.
- (2) The securities included in this report and future reports reflect the Company's 2 for 1 stock split on August 27, 2004.

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.