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FEC FORM 1

STATEMENT OF ORGANIZATION

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

BUNGE POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 750 FIRST STREET NE

(Check if address is changed) SUITE 1070

WASHINGTON DC 20002-

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

bungepac@bunge.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

202-216-1785

2. DATE

3. FEC IDENTIFICATION NUMBER ▶ C

4. IS THIS STATEMENT ☒ NEW (N) OR ☐ AMENDED (A)

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

Type or Print Name of Treasurer ROBERT D. SCARRY

Signature of Treasurer Robert D. Scarry Date 05 26 2004

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

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2003)

FEC/AN/412/PDF

5. TYPE OF COMMITTEE (Check One)

(a) ☐ This committee is a principal campaign committee. (Complete the candidate information below.)

(b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

Candidate Party Affiliation ☐ Office Sought: ☐ House ☐ Senate ☐ President State ☐ District ☐

(c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

(d) ☐ This committee is a ☐ (National, State or subordinate) committee of the ☐ (Democratic, Republican, etc.) Party.

(e) ☒ This committee is a separate segregated fund.

(f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

9. Name of Any Connected Organization or Affiliated Committee

BUNGE NORTH AMERICA, INC.

Mailing Address P.O. BOX 28500
11720 BORMAN DRIVE
ST. LOUIS MO 63146-1000

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship CONNECTED

Type of Connected Organization:

☒ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
☐ Membership Organization ☐ Trade Association ☐ Cooperative

Write or Type Committee Name

SIERRA POLITICAL ACTION COMMITTEE

7. **Custodian of Records:** Identify by name, address (phone number – optional) and position of the person in possession of committee books and records.

Full Name: THOMAS J. ERICKSON

Mailing Address: 750 FIRST STREET NE

WASHINGTON | DC | 20002-

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

PAC ADMINISTRATOR

Telephone number: 202-216-1780

8. **Treasurer:** List the name and address (phone number – optional) of the treasurer of the committee and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer: ROBERT D. SCHRAY

Mailing Address: P.O. BOX 28500

11720 BORMAN DRIVE

ST. LOUIS | MO | 63146-1000

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

TREASURER

Telephone number: 314-292-2000

Full Name of Designated Agent: THOMAS J. ERICKSON

Mailing Address: 750 FIRST STREET NE

SUITE 1070

WASHINGTON | DC | 20002-

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

PAC ADMINISTRATOR

Telephone number: 202-216-1780

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

COMMERCE BANK

Mailing Address

P.O. BOX 419248

KANSAS CITY | MO | 64141-

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

24038422431

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The FEC added this page to the end of this filing to indicate how it was received.

☑ Hand Delivered	Date of Receipt 6-1-04
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☐ Other (Specify):	Date of Receipt or Postmarked
PREPARER	6-2-04 DATE PREPARED

(5/2004)