

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

1. Name and Address of Reporting Person* <u>HAGENLOCKER EDWARD E</u>  (Last) (First) (Middle) 39400 WOODWARD AVENUE SUITE 165  (Street) BLOOMFIELD MI 48304  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>BOISE CASCADE CORP [ BCC ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  <input checked="" type="checkbox"/> Director 10% Owner  Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) 07/31/2003	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)  <input checked="" type="checkbox"/> Form filed by One Reporting Person  Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					(A)	(D)	Date Exercisable	Expiration Date					
Purchase Option	\$2.5						07/01/1999	(I)	Common Stock	762	762	D	
Purchase Option	\$2.5						07/01/2000	(I)	Common Stock	609	609	D	
Purchase Option	\$2.5						07/01/2001	(I)	Common Stock	1,212	1,212	D	
Purchase Option	\$2.5						07/01/2002	(I)	Common Stock	955	955	D	
Purchase Option	\$2.5						07/01/2003	(I)	Common Stock	80	80	D	
Stock Option (Right to Buy)	\$28						08/01/1999	07/31/2008	Common Stock	1,500	1,500	D	
Stock Option (Right to Buy)	\$38.75						07/30/2000	07/30/2009	Common Stock	1,500	1,500	D	
Stock Option (Right to Buy)	\$27.625						07/31/2001	07/31/2010	Common Stock	2,000	2,000	D	
Stock Option (Right to Buy)	\$36.2						07/31/2002	07/31/2011	Common Stock	2,000	2,000	D	
Stock Option (Right to Buy)	\$28.99						07/31/2003	07/31/2012	Common Stock	2,500	2,500	D	
Stock Option (Right to Buy)	\$24.79	07/31/2003		A		3,000	07/31/2004	07/31/2013	Common Stock	3,000	\$24.79	3,000	D

**Explanation of Responses:**

1. Option expires three years following option holder's termination as a director of the company.

**Remarks:**

[Karen Gowland POA for  
Edward E. Hagenlocker](#)

[08/01/2003](#)

\*\* Signature of Reporting Person      Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* 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).

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

**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 Number.**