FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* <u>HAFFNER DAVID S</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol LEGGETT & PLATT INC [LEG] | | | | | | | | 5. Relationship of Report (Check all applicable) X Director | | | ting Person(s) to Iss | | |
|---|---|--|------------------------|--|--|---|---|--------------|--|------------------|---|--|--------------------------------------|---|--|---|---|-------|---|
| (Last) (First) (Middle) NO 1 LEGGETT ROAD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/06/2008 | | | | | | | | | belov | cer (give title w) ef Executive C | | below | · |
| (Street) CARTHAGE MO 64836 | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | |
| (City) | (St | | Zip) | lon Doriv | on-Derivative Securities Acquired, Disposed of, or Benefic | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) | | | | 2. Transacti Date | 2. Transaction | | 2A. Deemed Execution Date, | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar | | | 5. Amoun Securities Beneficia Owned Fo | | nt of es ally following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Reported Transact (Instr. 3 a | ion(s) | | | (Instr. 4) |
| Common Stock | | | | 06/06/2008 | | | | A | | 904.6734 | A | \$14 | .88 | 647,685.1215 | | | D | | |
| Common Stock | | | | 06/06/2008 | | | | A | | 318.666 | A | \$15 | 648,00 | | 3.7875 | D | | | |
| Common Stock | | | | | | | | | | | | | | | 13, | 13,270 | | Ι . | Custodian - daughters |
| Common Stock | | | | | | | | | | | | | | | 17,050 | J.7271 ⁽¹⁾ | | I ! | Held in Trust under Issuer's Retirement Plan |
| | | Та | ıble II | - Derivat (e.g., pı | ive S uts, c | ecur alls, | ities / | Acqı ants | uired, , opti | Dis _l | posed of, convertib | or Bei le sec | neficia uritie: | ally (s) | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execution Date, if any | | 4. Transa Code 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exer Expiration I (Month/Day | | Date | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | 3 Di Si (li | Price of erivative ecurity nstr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | Ownersh Form: Direct (D or Indirect (I) (Instr. | | Beneficial Ownership ct (Instr. 4) |
| | | | | | Code | V | (A) | (D) | Date Exerc | isable | Expiration Date | Title | Amoun or Numbe of Shares | r | | | | | |

Explanation of Responses:

1. Balance has been updated to reflect the acquisition of 261.3096 shares under the Issuer's Restated Stock Bonus Plan during the 1st quarter of 2008, in transactions exempt under Rule 16b-3(c).

Aileen A. Gronewold

06/09/2008

** 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.