FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB Number: 3235-0287 Expires: January 31, 2005 Estimated average burden hours per response. . .0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

Filed By Romeo & Dye's Instant Form 4 Filer

OMB APPROVAL

1. Name and Address of Reporting Person*					Issuer Name and	Ticker o	r Trac	ling Syn	nhol	6. Relationship of Reporting Person(s)					
					eggett & Platt, Inc				1001	to Issuer (Check all applicable)					
Haffner David	S.			Г	-88		(-			X Director		10% Owner			
(Last)	(First)	μ.	I.R.S. Identification		er		ment for Dav/Year	X Officer (give title below)Other (specify below)							
No. 1 Leggett R	Road		if an entity (voluntary)				002	President, Chief Operating Officer							
	(Street)	1					nendment,	7. Individual or Joint/Group Filing (Check Applicable Line)							
									_	X Form filed by One Reporting Person					
Carthage, MO 64836									/Day/Year)	Form filed by More than One Reporting Person					
(Cit	y) (State)	İ	Ta	ble I —	Non-	Derivat	ive Securities	s Acquired,	cquired, Disposed of, or Beneficially Owned						
1. Title of	2. Trans-	2A.	3. Tran	s-	4. Securities Acqu	ired (A)	or Di	sposed	5. Amount of	f	6. Owner-	7. Nature of Indirect			
Security	action	Deemed	action		of (D)				Securities		ship Form:	Beneficial Ownership			
(Instr. 3) Date Execution ((Instr. 3, 4 & 5)	Beneficially			Direct (D)	(Instr. 4)					
	(Month/ Day/ Year)	Date,	(Instr. 8	3)				Owned Follo		w-	or Indirect				
	rear)	if any (Month/Day/ Year)	Code	V	Amount	(A)	(A) Pri		ing Reported	g Reported					
						or			Transactions(s) (Instr. 3 & 4)		(Instr. 4)				
						(D)	(D)								
Common Stock	11/01/2002		A	Г	78			17.68		664,151	D				
Common Stock	<u> </u>									14,362	I	Held in Trust under Issuer's Retirement Plan			
Common Stock										12,394	I	Custodian - Daughters			
Common Stock										6,197	I	Custodian - Son			

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

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

FORM 4 (continued) Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2. Conver-	3.	3A.	4.	5. Number of I	6. Date		7. Title and Amount 8. Price of			9. Number of	10.	11. Nature	
Derivative	sion or	Trans-	Deemed	Trans-	Securities Acqu	Exercis	able	of Un	derlying	Derivative	Derivative	Owner-	of Indirect	
Security	Exercise	action	Execution	action	Disposed of (D	and Expiration		Secur	ities	Security	Securities	ship	Beneficial	
	Price of	Date	Date,	Code			Date		(Instr.	3 & 4)	(Instr. 5)	Beneficially	Form	Ownership
(Instr. 3)	Derivative	Derivative if any (Instr. 3, 4 & 5))	(Month/D	ay/				Owned	of	(Instr. 4)		
	Security		(Month/	(Instr.		Year)					Following	Deriv-		
		Day/ Year)	Day/ Year)	8)								Reported	ative	
		'	- /									Transaction(s)	Security:	
												(Instr. 4)	Direct	
													(D)	
				Code V	(A)	(D)	Date	Expira-	Title /	Amount or			or	
							Exer-	tion	1 1	Number of			Indirect	
							cisable	Date		Shares			(I)	
1		1	l			1	1		1 1		l		(Instr. 4)	

Explanation of Responses:

By: /s/ **David S. Haffner** by John A. Lyckman, Attorney-in-fact 11/04/2002 Date

**Signature of Reporting Person

**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.

^{*} If the form is filed by more than one reporting person, see Instruction 4(b)(v).