## 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

<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

## 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

		565.			Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	or Number of Shares	er					
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any				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)		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)				9. Numbe derivative Securities Beneficial Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
		Ta	able II -								osed of, convertib				Owned				
Common	Stock			11/14/	2003				J <sup>(1)</sup>		7,177	D	4	<b>5</b> 0		0		I	Custodian - son
Common	Stock														14	,354		I	Custodian - daughters
Common	Stock														14	,678		I	Held in Trust under Issuer's Retirement Plan
Common	Stock			11/14/	2003				A		68	A	\$1	7.38	682	2,024		D	
				(Month/Day/Year)		8) Code	v	Amount	nount (A) or (D) Pric		e	Owned Following Reported Transaction(s) (Instr. 3 and 4)		(I) (Instr. 4)		Ownership (Instr. 4)			
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year		Execution Date, ear) if any		Code (Instr.		4. Securities Acquired (A) or			or 5. Amount of Securities Beneficially		es ially	6. Ownership Form: Direct (D) or Indirect		7. Nature of Indirect Beneficial			
(=-9)				on-Deriv	/ative	Sec	uritie	s Ac	quired	l, Di	sposed o	f, or B	enefi	ciall	y Own	ed			
CARTHA (City)			64836 (Zip)											X Form filed by One Reporting Persor Form filed by More than One Repor Person					
(Street)					4. I1	Amer	ndment	, Date (	of Origin	al File	ed (Month/Da	ay/Year)		6. In Line		or Joint/Gro	oup Fil	ing (Check	Applicable
(Last) (First) (Middle)  NO 1 LEGGETT ROAD			3. Date of Earliest Transaction (Month/Day/Year) 11/14/2003									X Officer (give title below) Other (specify below)  Pres & Chief Operating Officer							
1. Name and Address of Reporting Person*  HAFFNER DAVID S				2. Issuer Name and Ticker or Trading Symbol  LEGGETT & PLATT INC [ LEG ]								5. Relationship of Repor (Check all applicable) X Director			Ü	10%	Owner		

## **Explanation of Responses:**

1. Adult son no longer lives in Reporting Person's household.

John A. Lyckman \*\* Signature of Reporting Person 11/17/2003

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.