Edgar Filing: DeSonier David M - Form 4

DeSonier I	David M											
Form 4												
September	27, 2011											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										OMB APPROVAL		
CONIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMMISSION	OMB Number:	3235-0287		
Check		F CHANGES IN BENEFICIAL OWNERS						Expires:	January 31,			
if no lo subject	MENT OF						ERSHIP OF	Estimated av	2005 /erage			
Section		SECURITIES						burden hour				
Form 4		~			. ~ .		response	0.5				
Form 5 obligat	iona Pileu pu						-	Act of 1934,				
	ontinue. Section 17			•	•	- ·		935 or Section				
	struction	30(h) (of the I	Investme	nt Compan	y Ac	t of 1940					
1(b).												
(Print or Typ	e Responses)											
1. Name and Address of Reporting Person *				ier Name a	nd Ticker or	Tradiı	0	5. Relationship of Reporting Person(s) to				
DeSonier		Symbol					Issuer					
		LEGGETT & PLATT INC [LEG]				EG]	(Check all applicable)					
(Last)	(First)	(Middle)	3. Date	of Earliest	Transaction				,			
		(Month/Day/Year)				-	Director 10% Owner X_ Officer (give title Other (specify					
NO. 1 LE		09/23/2011					X_ Officer (give title Other (specify below) below)					
							SVP-Strategy&InvestorRelations					
		4. If Amendment, Date Original				6	6. Individual or Joint/Group Filing(Check					
		Filed(Month/Day/Year)					Applicable Line)					
CARTHA	GE, MO 64836							erson		8		
(City)	(State)	(Zip)	Ta	ble I - Non	-Derivative	Secur	ities Acqui	red, Disposed of,	or Beneficiall	y Owned		
1.Title of	2. Transaction Date	2A. Deemee	d	3.	4. Securitie	s Acq	uired (A) or	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year)	Execution E	Date, if	TransactionDisposed of (D)				Securities Beneficially Owned	Ownership	Indirect		
(Instr. 3)		any (Month/Day	/Vear)	Code (Instr. 8)	(Instr. 3, 4 and 5)					Beneficial Ownership		
		(Monul/Day	(/ 1 cai)	(Insu. 0)				Following	Direct (D) or Indirect	(Instr. 4)		
						(A)		Reported	(I)			
						or		Transaction(s) (Instr. 3 and 4)	(Instr. 4)			
_				Code V	Amount	(D)	Price	(IIIsti. 5 and 4)				
Common	09/23/2011			А	25.6248	А	\$	34,743.6215	D			
Stock							16.7365					
Common	09/23/2011			А	31.742	А	\$ 15 750	2 34,775.3635	D			
Stock	072572011			11	51.772	11	φ 15.752	- 51,115.5055	D			

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.

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 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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Tit Amou Under Secur (Instr	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
DeSonier David M NO. 1 LEGGETT ROAD CARTHAGE, MO 64836			SVP-Strategy&InvestorRelations				
Signatures							
/s/ S. Scott Luton, by POA	09/27/20	011					

**Signature of Reporting Person

Date

Explanation of Responses:

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.