FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL |
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OMB Number: 3235-0287 | Expires: December 31, 2014

Expires: 2014
Estimated average burden
hours per response: 0.5

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

| 1. Name and Address of Reporting Person* <u>BURGESS SHARI L</u> | | | | | | | 2. Issuer Name and Ticker or Trading Symbol LEAR CORP /DE/ [LEA] | | | | | | | | | | | cable) or | g Pers | son(s) to Iss 10% Ov | vner | |
|---|---|--|---|---|--|-------|--|-------------------------|--------------|-----------------------------------|----------|--|---------------------------|--|---------------------------------------|---------------------------------------|--|--|---|-----------------------------------|---|--|
| (Last) | (Fi | rst) | | 3. Date of Earliest Transaction (Month/Day/Year) 07/22/2003 | | | | | | | | | | X | | Officer (give title below) VP & Trea | | Other (s below) urer | specify | | | |
| (Street) | | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | | | p Filing (Check App | | · | |
| (City) | (Si | (State) (Zip) | | | | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | Tab | le I - Nor | n-Deriv | /ative | Se | curit | ies Ad | cqui | red, D | isp | osed o | of, o | r Bei | nefici | ally | Owned | 1 | | | | |
| 1. Title of Security (Instr. 3) 2. Transar Date (Month/Da | | | | | | ar) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | 3. Fransact Code (In: 3) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | | 4 and Securiti Benefic Owned | | es ally Following | Form (D) o | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | - | Code \ | , | Amount | | (A) or (D) | Price | e | Reported Transact (Instr. 3 | ion(s) | | | (Instr. 4) | |
| Common Stock 07/2: | | | | | | /2003 | | | \top | М | | 1,000 | | Α | 37 | .25 | 2,300 | | D | | | |
| Common Stock 07/22/ | | | | | 2/2003 | 2003 | | | | S | | 1,000 | | D | 52 | .04 | 1,300 | | | D | | |
| Common Stock 07/22/ | | | | | 2/2003 | 2003 | | | | М | | 2,750 | | A | 22 | .12 | 4,0 | 050 | | D | | |
| Common Stock 07/22/ | | | | | 2/2003 | 2003 | | | | S | | 2,750 |) | D 52 | | 2 | 1,300 | | D | | | |
| | | 7 | able II - | | | | | | | | | sed of, onverti | | | | | wned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Da | Date, | 4. Transaction Code (Instr 8) | | of Deri Sec Acq (A) of Disp | oosed D) tr. 3, 4 | Expi | ate Exer iration D nth/Day/ | ate | | Ame Sec Und Deri | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | De Se (Ir | Price of erivative ecurity estr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | Owners Form: Direct (I or Indire (I) (Instr | Ownership | Beneficial Ownership ct (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exer | e rcisable | Ex Da | piration te | Title | . | Amour or Number of Shares | er | | | | | | |
| Option (Right to Buy) | 37.25 | 07/22/2003 | | | M | | | 1,000 | 05/0 | 05/2000 | 05 | /05/2007 | | nmon ock | 1,000 | | \$ 37.25 | 0 | | D | | |
| Option (Right to | 22.12 | 07/22/2003 | | | M | | | 2,750 | 02/2 | 23/2003 | 02 | /23/2010 | Con | nmon | 2,750 | | \$22.12 | 0 | | D | | |

Explanation of Responses:

<u>Karen M. Rosbury Attorney-</u> <u>In-Fact</u>

07/23/2003

** 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.