FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|------------------|------------|---------------|------------------|

| | OMB APPRO | VAL |
|---|-------------------------|-----------|
| | OMB Number: | 3235-0287 |
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| l | 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>LIPFORD ROCQUE E</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol LA-Z-BOY INC [LZB] | | | | | | | | | (Ch | telationship eck all appl X Direct | , | | | |
|--|--|--|---|-----------|--|---|-------|--------------|--|--|----|------------------|-------------------|------------------|--|--|--------------------|--|--|------------|
| (Last) 1284 N. | (F TELEGRA | , | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/12/2003 | | | | | | | | | | Office below | r (give title) | | Other (specify below) | |
| (Street) MONROE MI 48162 | | | | 4. I | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Line | X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | |
| (City) | (S | tate) (| (Zip) | | | | | | | | | | | | | Perso | n | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| Date | | | | · · · · · | | 2A. Deemed Execution Date, if any (Month/Day/Yea | | Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | | Benefic Owned | es ially Following | s Form ally (D) o ollowing (I) (Ir | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | С | ode | v | Amount | Amount (A) or (D) | | Price | Reporte Transac (Instr. 3 | tion(s) | | | (Instr. 4) |
| Common Shares | | | | | | | | | | | | | | | 12 | 2,900 | | D | | |
| Common Shares | | | | | | | | | | | | | | | 2,4 | 2,400(2) | | | By Spouse | |
| | 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. Deemee Execution I if any (Month/Day | Date, | 4. Transaction Code (Instr. 3) | | | | 6. Date Exercisal Expiration Date (Month/Day/Year) | | | Amount of | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | s Blly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exerc | isable | | xpiration ate | Title | 0 N 0 | lumber | | | | | |
| Right to Buy (Stock | \$5.11 | 08/12/2003 | | | J ⁽¹⁾ | | 1,400 | | 08/12 | 2/2003 | 09 |)/12/2003 | Comn Shar | | 1,400 | \$5.11 | 1,400 | | D | |

Explanation of Responses:

- 1. These shares were granted under the Restricted Share Plan for Non-Employee Directors as amended and restated through August 12, 2003.
- 2. The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of the securities for purposes of Section 16 or for any other purpose.

Remarks:

Rocque E. Lipford

08/13/2003

** 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.