# Edgar Filing: CROWN CASTLE INTERNATIONAL CORP - Form 4

## CROWN CASTLE INTERNATIONAL CORP

Form 4

August 29, 2002

	/	OMB APPROVAL						
	/ OMB Num / Expire / Estima	mber: 3235-0287 , s: December 31, 2001 , ted average burden , per response 0.5						
++   FORM 4   ++ [_] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See	STATEMENT OF CHANGES IN BE	. 20549  NEFICIAL OWNERSHIP  a) of the Securities ion 17(a) of the						
	Instruction 1(b). Section 30(f) of the Investment Company Act of 1940 (rint or Type Responses)							
1. Name and Address	of Reporting Person*							
HUTCHESON	EDWARD	С.						
(Last)	(First)	(Middle)						
	c/o Crown Castle International Corp	p.						
	(Street)							
Houston	Texas	77057						
(City)	(State)	(Zip)						
2. Issuer Name and T	Ticker or Trading Symbol							
CROWN CASTLE INTE	ERNATIONAL CORP. (CCI)							
3. I.R.S. Identification (voluntary)	ation Number of Reporting Person, if	an entity						
4. Statement for Mor	nth/Year August 2002							
5. If Amendment, Dat	ce of Original (Month/Year)							
X Director _	Reporting Person(s) to Issuer (Check Officer 10% Owner (give title below)	r Other (specify below						
7. Individual or Joi X Form filed b	int/Group Filing (Check Applicable L by One Reporting Person by More than One Reporting Person							

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Table I--Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)		action Date	action Code	3. Trans- action Code (Instr. 8)  4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				5. Amount of Securities Beneficiall Owned at End of
	_	Year)	Code	V	Amount	(A) or (D)	Price	Month (Instr. 3 a
Common Stock, \$0.01 Par Value	8/	16/02	P		74,100	А	\$1.40	174,616
Common Stock, \$0.01 par value								
Reminder: Report on owned direct * If the form is file Potential persons whein this form are not valid OMB control num Table IIDerivation	ctly ed b c ar req mber	or indi: y more the e to respuired to .	ine for ea rectly. han one pe pond to th respond u	ch cl rson, e col	ass of secur see Instruc lection of i the form di	ities bene: tion 4(b)(v	ficially v) contained urrently	
(e.g., puts,  1. Title of Derivat Security (Instr.	cal  ive	ls, warra		ons,  er- or cise e of v- e	convertible  3. T a D ()	securities	)  4. Tra tic	nsac- on Code ostr. 8)
							Code	V

Table II--Derivative Securities Acquired, Disposed of, or Beneficially Owned

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(e.g., puts, calls, warrants, options, convertible securities)

cisabi Expira Date	cisable and Expiration Date (Month/Day/		7. Title and Amount of Underlying Securities (Instr. 3 and 4)			8.	Price of Deriv- ative Secur- ity (Instr. 5)	Numbe of De ative Secur ities Bene- ficia Owned
Date Exer- cisable	Expira- tion Date		Title	Amount Number Shares	of		3)	at En of Month (Inst

#### Explanation of Responses:

(1) The reporting person disclaims benefit 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.

/s/ Edward C. Hutcheson, Jr.	8/27/02
**Signature of Reporting Person	Date
EDWARD C. HUTCHESON, JR.	

\*\* 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 provided 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.