	=======================================	/	========	/					
		/ OMB	APPROVAL	/ /					
		/ OMB Number / Expires: D / Estimated / hours per	ecember 31, average bur	2001 / den /					
++ FORM 4	U.S. SECURITIE		E COMMISSIO	,					
++ [_] Check this box if		IGTON, D.C. 20							
no longer subject to Section 16.	STATEMENT OF CHAN								
Form 4 or Form 5 obligations may continue. See Instruction 1(b). (Print or Type Response	Filed pursuant to Se Exchange Act of a Public Utility Hol Section 30(f) of the S)	.934, Section ding Company	17(a) of th Act of 1935 ompany Act	e or of 1940					
Name and Address of MORELAND	Reporting Person* W.			AMIN	-				
	 (First)				-				
, ,	o Crown Castle Internat	500	·	ŕ					
	(Street)				-				
Houston	Texas			7057	-				
(City)	(State)		(Zip)					
2. Issuer Name and Tic CROWN CASTLE INTERN									
3. I.R.S. Identificati (voluntary)	on Number of Reporting F	Person, if an	entity						
4. Statement for Month	/Year August 2002								
5. If Amendment, Date	of Original (Month/Year)								
	orting Person(s) to Issu	er (Check all	applicable						
	Officer (give title below) Senior Vice President, ((speci	fy below)					
X Form filed by	/Group Filing (Check App One Reporting Person More than One Reporting								
Table INon-Derivative	Securities Acquired, Di	sposed of, or	Beneficial	ly Owned					
	. Trans- 3. Trans-	4. Securiti		(A)	5. Amount of		7. Nature		
of Security	action action Date Code (Month/ (Instr. 8)		sed of (D) 3, 4 and 5)		Securities Beneficially	ship Form:	of In- direct		
(Instr. 3)	(Month/ (Instr. 8) Day/ Year)				Owned at End of Month	Direct (D) or Indirect	Bene- ficial Owner-		
	Code V	Amount	(A) or (D)	Price	(Instr. 3 and 4		ship		
Common Stock									
		30,000			50,000				
	Securities Acquired, Dis lls, warrants, options,			y Owned					
1. Title of Derivative Security (Instr. 3)	sion or Exercise Price of Deriv- ative	ac Da (M Da	3. Trans- action Date (Month/ Day/ Year)		n Code str. 8)	5. Number of Deriv- ative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			
	Security			Code	V	(A) (D)			

Table IIDerivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
	6. Date Exer- 7. Title and Amount or cisable and Underlying Securit (Instr. 3 and 4) Date (Month/Day/ Year)			ng Securities	8.	Price of Deriv- ative Secur- ity (Instr.	9.	Number of Deriv- ative Secur- ities Bene- ficially Owned	10.	Owner- 11. ship Form of De- rivative Securities Bene- ficially		Na- ture of In- direct Bene- ficial Owner-
	Date Exer- cisable	Expira- tion Date	Title	Amount or Number of Shares	- 5)		at End of Month (Instr. 4)		Owned at End of Month(1) (Instr. 4)		ship (Instr. 4)	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Explanation of Responses:

/s/ W. BENJAMIN MORELAND 8/19/02

**Signature of Reporting Person
W. BENJAMIN MORELAND

- * If this 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 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.