

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL					
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Estimated average burden					
nours per respons	se 0.5				

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Respon	nses)											
Name and Address of Reporting Person * KNOX RUTH A		2. Date of Event Requiring Statement (Month/Day/Year) 07/01/2003		_	3. Issuer Name and Ticker or Trading Symbol CAPITAL CITY BANK GROUP INC [CCBG]							
(Last)	(First)	(Middle)	— 07/01/2003 —			Issuer				5. If Amendment, Date Original Filed(Month/Day/Year)		
,	(Street)						(Check all applicable) X_Director			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person		
(City)	(State)	(Zip)		Table I - Non-Derivative Securities Beneficially Owned								
1.Title of Security (Instr. 4)			В	2. Amount of Securities Beneficially Owned (Instr. 4)		d		4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Reminder: Report on	Person	s who respond the form displa	to the cays a cur	ollection rently va	of info	ormation IB contro	contained in t I number.	this form are no	·			
1. Title of Derivative (Instr. 4)		2. an	Date Exercisable and Expiration Date Month/Day/Year)		3. Title and Amount of Securities Underlying Security (Instr. 4)		ount of	4. Conversion or Exercise Price of Derivative	5. Owne Form of Derivati Security	ership ive v: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			ate xercisable	Expiration Date	Ti+1a	Amount of Shares	or Number of	Security	(D) or Ir (I) (Instr. 5)			

Reporting Owners

Depositing Owner Name /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
KNOX RUTH A						
	X					
,						

Signatures

Ruth A. Knox	07/10/2003
**Signature of Reporting Person	Date

Explanation of Responses:

No securities are beneficially owned

- * If the form is filed by more than one reporting person, see Instruction 5(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.