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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden 0.5 hours per response...

5. Relationship of Reporting Person(s) to Issuer

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person *

(Print or Type Responses)

STATEMENT OF CHANGES IN 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

2. Issuer Name and Ticker or Trading Symbol

LENNON MAX				DELTA APPAREL INC [DLA]							X Di	(Check all applicable) X Director 10% Owner				
101 TURKEY BRANCH ROAD (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 09/26/2005								icer (give title b		Other (specify b	elow)	
(Street) MARS HILL, NC 28754				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Indiv _X_Form Form	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)				Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea		Date	2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)					D) Benefic Reporte	Amount of Securities neficially Owned Following ported Transaction(s) str. 3 and 4)		. /	Beneficial Ownership		
						Code	V	Amou	(A) (D)		rice			or Indirect (I) (Instr. 4)	(Instr. 4)	
Common	Stock, \$.0)1 Par Value	09/26/2005			A		692	A	\$	0 14,462	2		D		
				Derivative Secu			curr red, I	ently v	alid OM d of, or F	B con Benefi	trol numbe	r.	form displays			
Security	Conversion	3. Transaction Date (Month/Day/Y		4. Transaction Code (ear) (Instr. 8)	of Der Sec Acq (A) Disp of (Ins	ivative urities juired or posed	6. Date Exercisable and Expiration Date (Month/Day/Year)			Aı Uı Se	Title and mount of nderlying securities natr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code V			Date Exerc	cisable	Expiration Date	on Ti	Amount or Number of Shares					
Repor	ting O	wners														

MARS HILL, NC 28754

Signatures

LENNON MAX

Reporting Owner Name / Address

101 TURKEY BRANCH ROAD

By: Deborah Merrill, POA	09/28/2005			
**Signature of Reporting Person	Date			

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Relationships

Officer

Other

10% Owner

Director

X

** 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.