|] | FORM 5 |
|---|---------------------------------|
| | Check this box if no longer |
| | subject to Section 16. Form 4 |
| | or Form 5 obligations may |
| | continue. See Instruction 1(b). |
| | Form 3 Holdings Reported |

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

OMB APPROVAL OMB Number: 3235-0362 Estimated average burden hours per response ... 1.0

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Form 4 Transactions Reported 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 WATSON MART | 1 0 | 2. Issuer Name and Ticker or Trading Symbol DELTA APPAREL INC [DLA] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | |
|------------------------------------|----------|------------------------------------------------------------------------|----------------------------------------------------------------------------------|-------------------|---------------------|---------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|----------------------------------|-------------|--|--|
| (Last) | (First) | (Middle) | 3. Statement for Iss (Month/Day/Year) 06/30/2003 | suer's Fiscal Yea | ar Ended | | X_Officer (give title below)Other (specify below) V.P Human Resources | | | | | |
| | (Street) | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | 6. Individual or Joint/Group Reporting (check applicable line) | | | | |
| , | | | | | | | _X_Form Filed by One Reporting Person Form Filed by More than One Reportin | g Person | | | | |
| (City) | (State) | (Zip) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | |
| 1. Title of Security | | 2. Transaction | 2A. Deemed | 3. Transaction | 4. Securi | ties Acq | uired | 5. Amount of Securities | 6. | 7. Nature | | |
| (Instr. 3) | | Date | Execution Date, if | Code | (A) or D | isposed of | of (D) | Beneficially Owned at end of | Ownership | of Indirect | | |
| | | (Month/Day/Year) | any | (Instr. 8) | (Instr. 3, 4 and 5) | | | Issuer's Fiscal Year | Form: | Beneficial | | |
| | | | (Month/Day/Year) | | | | | (Instr. 3 and 4) | Direct (D) | Ownership | | |
| | | | | | Amount | (A) or (D) | Price | • | or Indirect (I) (Instr. 4) | (Instr. 4) | | |

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

Persons who respond to the collection of information contained in this form are not SEC 2270 (9-02) required to respond unless the form displays a currently valid OMB control number.

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

| | (<i>e.g.</i> , puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | |
|-----|-------------------------------------------------------------------------|-------------|------------------|--------------------|-------------|------------|----------|---------------------|--------------------|---------------|--------|-------------|--------------|-------------|-------------|
| 1. | Title of | 2. | 3. Transaction | 3A. Deemed | 4. | 5. | | 6. Date Exercisable | | 7. Title and | | 8. Price of | 9. Number | 10. | 11. Nature |
| De | rivative | Conversion | Date | Execution Date, if | Transaction | Number | | and Expiration Date | | Amount of | | Derivative | of | Ownership | of Indirect |
| Se | curity | or Exercise | (Month/Day/Year) | any | Code | of | | (Month/Day/Year) | | Underlying S | | Security | Derivative | Form of | Beneficial |
| (In | istr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Deriv | ative | | | Securities | | (Instr. 5) | Securities | Derivative | Ownership |
| | | Derivative | | | | Secur | rities | s | | (Instr. 3 and | | | Beneficially | Security: | (Instr. 4) |
| | | Security | | | | Acqu | Acquired | | | 4) | 4) | | Owned at | Direct (D) | |
| | | | | | | (A) or | | | | | | | End of | or Indirect | |
| | | | | | | Disposed | | | | | | | Issuer's | (I) | |
| | | | | | | of (D) | | | | | | | Fiscal Year | (Instr. 4) | |
| | | | | | | (Instr. 3, | | | | | | | (Instr. 4) | | |
| | | | | | | 4, and 5) | | | | | | | | | |
| | | | | | | | | | | | Amount | | | | |
| | | | | | | | | Dete | Enviration | | or | | | | |
| | | | | | | | | | Expiration Date | Title | Number | | | | |
| | | | | | | | | Exercisable | | | of | | | | |
| | | | | | | (A) | (D) | | | | Shares | | | | |

Reporting Owners

| D | eporting Owner Name / Address | Relationships | | | | | | | |
|---|--------------------------------|---------------|-----------|---------------------|-------|--|--|--|--|
| | Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | | |
| | WATSON MARTHA M | | | V.P Human Resources | | | | | |

Signatures

/s/ Watson, Martha M. 07/08/2003 Signature of Reporting Person

Date

Explanation of Responses:

- * 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 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.