

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

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#### 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 Responses)

1. Name and Address of Reporting Person <sup>*</sup> PETERSON DAVID T	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol DELTA APPAREL INC [DLA]				
550 PHARR ROAD, SUITE 850	08/14/2003	to Issuer	k all applicable)		5. If Amendment, Date Original Filed(Month/Day/Year)	
(Street) ATLANTA, GA 30305		(Check X_ Director Officer (give below)			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 Beneficially Owned				
(Instr. 4) Bene		2. Amount of Securities Beneficially Owned Instr. 4)		4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock, \$.01 Par Value 1,000			D			

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

SEC 1473 (7-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

ſ	1. Title of Derivative Security	2. Date Exer	rcisable	3. Tit	le and Amount of	4. Conversion	5. Ownership	6. Nature of Indirect
	(Instr. 4)	-		Securities Underlying		or Exercise	Form of	Beneficial Ownership
				Derivative Security		Price of	Derivative	(Instr. 5)
			(Instr. 4)		. 4)	Derivative	Security:	
						Security	Direct (D) or	
			Expiration	Titla	Amount or Number of	2	Indirect (I)	
		Exercisable Da	Date	Shares		(Instr. 5)		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
PETERSON DAVID T 550 PHARR ROAD SUITE 850 ATLANTA, GA 30305	Х					

## Signatures

/s/ Peterson, David T.

\*\*Signature of Reporting Person

08/25/2003 Date

# **Explanation of Responses:**

\* 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).

### **Remarks:**

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

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