FORM 4

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

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

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

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

(Print or Type Responses) 1. Name and Address of Reporting Person * LUNG DAVID D			2. Issuer Name and Ticker or Trading Symbol PATRICK INDUSTRIES INC [PATK]					:	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_Director 10% Owner				
P.O. BOX 638	(First)	(Middle)	3. Date of Earlies 12/05/2003	t Transact	on (Mo	nth/Day/	Year)	•	Officer (give title below) Other (specify below)			elow)	
(Street) ELKHART, IN 46515			4. If Amendment, Date Original Filed(Month/Day/Year)						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 Beneficia				Beneficially (ally Owned					
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i any (Month/Day/Year	(Instr. 8)		4. Securities Acquire (A) or Disposed of (I (Instr. 3, 4 and 5)		of (D)	Beneficial	nt of Securities ally Owned Following Transaction(s)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
			(World) Day/ I cal	Code	V	Amount	(A) or (D)	Price	(msu. 3 a	3 and 4)		or Indirect (I) (Instr. 4)	
Common Stock		12/05/2003		S		5,000	D	\$8.6	56,956			D	
Reminder: Report on	a separate line f	or each class of secur	ities beneficially o	wned dire	Perso	ons who	respon	m are	not requ		ormation spond unleader trol number	ss	1474 (9-02)
Reminder: Report on	a separate line f	Table II - I	Derivative Securi	ties Acqui	Perso conta the fo	ons who ained in orm disp	respor this for plays a o	m are currer eficiall	not reqเ ntly valid	ired to res	spond unle	ss	1474 (9-02)
1. Title of Derivative Security (Instr. 3) 2. Conversion of Exercise Price of Derivative Security	3. Transaction Date (Month/Day	Table II - I (on 3A. Deemed Execution Data any		ties Acqui arrants, o	Persoconta the formed, Dispetions, 6. Da and E (Mon	ons who ained in orm disp	respon this for plays a conf, or Bend ble secur isable in Date	m are currenteficiall rities) 7. Tir Amo Under Secu	not reqเ ntly valid	OMB cont	spond unleaderol number	of 10. Ownersl Form of Derivati Security Direct (I or Indire	11. Nation of Indir Benefic Owners: (Instr. 4
1. Title of Derivative Security (Instr. 3) Conversion or Exercise Price of Derivative	3. Transaction Date (Month/Day	Table II - I (on 3A. Deemed Execution Data any	Derivative Securive.g., puts, calls, was te, if Transaction Code	5. Number of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3,	Persoconta the for red, Dis ptions, 6. Da and E (Mon	ons who ained in orm disp sposed of converti tte Exerci Expiration tth/Day/Y	o respor this for plays a c f, or Bend ble secur isable n Date dear)	m are current eficiall rities) 7. Tir Amo Unde Secu (Instrument)	not requally valid by Owned the and bunt of erlying rities	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transactions	of 10. Ownersl Form of Derivati Security Direct (I or Indirects) (I)	11. Nat of Indir Benefic Owners: (Instr. 2

D (O N (Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
LUNG DAVID D						
P.O. BOX 638	X					
ELKHART, IN 46515						

Signatures

David D. Lung by Andy L. Nemeth, Agent	12/08/2003
**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 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.