Instruction 1(b).

## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
obligations may continue. See	

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

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

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1. Name and Address of Reporting Person*  JUNCK MARY E						2. Issuer Name <b>and</b> Ticker or Trading Symbol  LEE ENTERPRISES INC [ LEE ENT ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner					
					_									^						
(Last) (First) (Middle)						Date (		Tran	saction (M	onth/[	Day/Year)	_ X	below)	(give title Other below)		· ·				
LEE ENTERPRISES INC						11212	.005						Office	i, Chairm	iaii, r	res. & Cr	.0			
215 N M	IAIN STRE	ET SUITE 400				If Ama	un dun o na	Doto	of Origina	Filed	/Month/Do	()(0.0.1)		C Inc	dividual or 1	aint/Craus	Filing	(Chaal: An	oliooblo	
(Street)					-   4.	II AIII	enament,	Date	oi Origina	Filed	(Month/Day		6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) DAVENPORT IA 52801															X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(S	itate)	(Zip)											Person	Person					
		Ta	ble I - No	n-Deriv	vativ	e Se	curitie	s Ac	quired	, Dis	posed o	f, or I	3ene	eficially	/ Owned					
1. Title of	, or occurry (			Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code	Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3,			Beneficia Owned F	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A (D	) or )	Price	Reported Transact (Instr. 3	tion(s)			(Instr. 4)	
Common Stock				11/12	2/200	)3			A		40,000	0 A \$		\$43.25	110	110,007		D		
			Table II -								osed of, onvertib				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	4. Transaction Code (Instr. 8)				6. Date Exercisal Expiration Date (Month/Day/Year			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		s Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ect (Instr. 4)	
					$\vdash$					П				Amount						
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title		or Number of Shares						
Employee Stock Option (Right to Buy)	\$28.9375	05/10/1999			A		25,000		05/10/200	00(1)	05/10/2009	Comn		25,000	\$28.9375	25,000	0	D		
Employee Stock Option (Right to Buy)	\$25.938	11/14/2000			A		30,000		11/14/200	1(1)	11/14/2010	Comn		30,000	\$25.938	30,000	0	D		
Employee Stock Option (Right to Buy)	\$35.46	11/14/2001			A		75,000		11/14/200	2(1)	11/14/2011	Comn		75,000	\$35.46	75,000	0	D		
Employee Stock Option (Right to	\$43.25	11/12/2003			A		50,000		11/12/200	4(1)	11/12/2013	Comn		50,000	\$43.25	50,000	0	D		

## **Explanation of Responses:**

Buy)

1. These securities are exercisable as follows: 30% upon the first anniversary date of the grant; 60% upon the second anniversary date of the grant; and 100% upon the third anniversary date of the grant.

Edmund H. Carroll, Jr., Lmtd. POA, Attorney-in-Fact

11/13/2003

\*\* Signature of Reporting Person

Date

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

- \* 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.

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 Number.