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Form 4	YNIHIA										
January 10, 2	2005										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB AF OMB Number:	PROVAL 3235-0287			
Check thi if no long subject to Section 1 Form 4 of Form 5 obligation may cont <i>See</i> Instru	uant to So) of the P	ection 10 ublic Ut	SECUR 6(a) of the	ITIES e Securit ling Con	ies E 1pany	NERSHIP OF e Act of 1934, 1935 or Section 0	Anuary 3 Expires: 200 Estimated average burden hours per response 0				
1(b).					I I	J					
			2. Issuer Name and Ticker or Trading Symbol UNIFIRST CORP [UNF]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (M	liddle)	3. Date of Earliest Transaction					(Chec	eck all applicable)		
68 JONSPIN ROAD			(Month/Day/Year) 01/07/2005					X DirectorX 10% Owner X Officer (give title Other (specify below) below) Executive VP & Treasurer			
				endment, Date Original nth/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	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/Da	ed Date, if	3. Transactio Code (Instr. 8)	4. Securit r(A) or Di (Instr. 3,	ties A spose 4 and (A) or	cquired d of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of	
Common Stock				Code V	Amount	(D)	Price	2,740	I	By 401(k)	
Common Stock	01/07/2005			S	200	D	\$ 33.19	201,134	I <u>(1)</u>	By Trusts and LLC	
Common Stock								71,500	D		

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

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number.

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivatives Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
CROATTI CYNTHIA 68 JONSPIN ROAD WILMINGTON, MA 01887	Х	Х	Executive VP & Treasurer					
Signatures								
Cynthia Croatti, by power of attorney		01/10/200)5					
**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).

The reporting person is a trustee of the Marie Croatti QTIP Trust and a Director and minority owner of the general partner of The Croatti Family Limited Partnership, which are the direct owners of 2,600,000 shares each of Class B Common Stock. The reporting person is the manager of a limited liability company, Trilogy Investment Partners LLC, and a trustee for the following trusts, that, as of the date of

(1) filing this report, combined directly own the remainder of the reported securities: The Samuel E. Brown Gallo Trust - 1989, The Nicholas C. Brown Gallo Trust - 1989, the Monica Levenstein Gallo Trust - 1989 and the Lisa Levenstein Gallo Trust - 1989. The reporting person disclaims beneficial ownership of the reported securities, except to the extent of her pecuniary interest therein, and this report shall not be deemed an admission that the reporting person is the beneficial owner of the securities for purposes of Section 16 or any other purpose.

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.