

UNIFIRST CORP
Form 4
September 30, 2005

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
Croatti Family Limited Partnership

(Last) (First) (Middle)

C/O UNIFIRST CORPORATION, 68 JONSPIN ROAD

(Street)

WILMINGTON, MA 01887

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol

UNIFIRST CORP [UNF]

3. Date of Earliest Transaction (Month/Day/Year)

09/28/2005

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner
 Officer (give title below) Other (specify below)

Chief Exec Officer; Treasurer

6. Individual or Joint/Group Filing(Check Applicable Line)

Form filed by One Reporting Person
 Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 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 Ownership (Instr. 4) |
|---------------------------------|--------------------------------------|----------------------------------------------------|--------------------------------|-------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|----------------------------------------------------------|-----------------------------------|
| | | | | (A) or (D) | Price | | |
| Class B Common Stock | | | | | 2,483,750 | D ⁽¹⁾ | |
| Common Stock | 09/28/2005 | | S | 2,000 | D \$ 34.61 | 62,000 | D ⁽¹⁾ |
| Common Stock | | | | | 2,740 | I ⁽²⁾ | By 401(k) |
| Common Stock | | | | | 33,500 | D ⁽³⁾ | |
| | | | | | 1,499,852 | D ⁽⁴⁾ | |

| | | | | | | | | |
|----------------------------|--|--|--|-----------|--------------|--|--|------------------------|
| Class B Common Stock | | | | | | | | |
| Common Stock | | | | 188,034 | I <u>(5)</u> | | | By Trusts and LLC |
| Class B Common Stock | | | | 2,648,000 | I <u>(5)</u> | | | By Trusts and LLC |
| Common Stock | | | | 950 | I <u>(6)</u> | | | By Trusts and LLC |
| Class B Common Stock | | | | 2,600,000 | I <u>(6)</u> | | | By Trusts |
| Common Stock | | | | 20,705 | I <u>(7)</u> | | | By Estate and Trust |
| Class B Common Stock | | | | 2,841,644 | I <u>(7)</u> | | | By Estate and Trust |

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 required to respond unless the form displays a currently valid OMB control number.

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(9-02)

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. Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr |
|-----------------------------------------------------|--------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|--------------------------------------|--------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------|
| | | | | | | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| | | | | | | Code | V | (A) | (D) |

Reporting Owners

Reporting Owner Name / Address

Relationships

Reporting Owners

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| | Director | 10% Owner | Officer | Other |
|-----------------------------------------------------------------------------------------------------------|----------|-----------|-------------------------------|-------|
| Croatti Family Limited Partnership C/O UNIFIRST CORPORATION 68 JONSPIN ROAD WILMINGTON, MA 01887 | X | X | Chief Exec Officer; Treasurer | |
| CROATTI RONALD D 68 JONSPIN ROAD WILMINGTON, MA 01887 | X | X | Cheif Executive Officer | |
| CROATTI CYNTHIA 68 JONSPIN ROAD WILMINGTON, MA 01887 | X | X | Executive VP & Treasurer | |
| CROATTI MARIE 68 JONSPIN ROAD WILMINGTON, MA 01887 | | | | X |
| Croatti Management Associates, Inc. 68 JONSPIN ROAD WILMINGTON, MA 01887 | | | | X |

Signatures

Croatti Management Associates, Inc., by power of attorney

09/30/2005

__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).

- (1) See Note 1 to Addendum.
- (2) See Note 2 to Addendum.
- (3) See Note 3 to Addendum.
- (4) See Note 4 to Addendum.
- (5) See Note 5 to Addendum.
- (6) See Note 6 to Addendum.
- (7) See Note 7 to Addendum.

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.