

GRAHAM JOHN G
Form 3
April 07, 2003

**UNITED STATES SECURITIES AND EXCHANGE
COMMISSION
Washington, DC 20549**

Form 3

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP
OF SECURITIES**

OMB APPROVAL

OMB Number: 3235-0104
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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* Graham John G.	2. Date of Event Requiring Statement (Month/Day/Year) March 31, 2003	4. Issuer Name and Ticker or Trading Symbol NORTHEAST UTILITIES - NU	
(Last) (First) (Middle) c/o Northeast Utilities 107 Selden Street	3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary)	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director* ___ 10% Owner ___ Officer (give title below) Other (specify below)	6. If Amendment, Date of Original (Month/Day/Year)
(Street) Berlin Connecticut 06037		7. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person ___ Form filed by More than One Reporting Person	
(City) (State) (Zip)		*Trustee	

Table I & #151 Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Explanation of Responses:

/s/ John G. Graham, by O. Kay Comendul / POA

**Signature of Reporting Person

April 4, 2003

Date

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- * 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).

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