STATEMENT OF

CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person*

(Last)	Smith
(First)	Lance
(Middle)	А.
(Street)	55 North Street
(City)	Presque Isle
(State)	ME
(Zip)	04769-3235

2. Issuer Name and Ticker or Trading Symbol

(Issuer Name)	Maine Public Service Company
(Ticker or Trading Symbol)	MAP

3. I.R.S. or Social Security Number of Reporting Person (Voluntary)

(I.D. Number) 005-54-7480

4. Statement for Month/Day/Year

(Month/Day)	October
(Year)	2002

5. If Amendment, Date of Original (Month/Day/Year)

(Month/Day)
(Year)

6. Relationship of Reporting Person(s) to Issuer (Check all applicable)

Х

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

7. I nd i vidual or Joint/Group Filing (Check Applicable Line)

Х

Х	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	Date	2A. Deemed Execution	3. Transa Code (Instr.	acti	4. Securi Acquirec Disposec (Instr. 3,	l (A) l of (or (D)	Securities Beneficially Owned Following	Form: Direct (D)	7. Nature of Indirect Beneficial
(Instr. 3)	Dav/Year)	any (Month/ Day/Year)	Code	V	Amount	(A) or (D)	Price	Reported Transaction(s)	or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common	10/2/02	10/2/02	Р		21	А	27.00	553	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

Security Acquired (A) or Disposed	Security	or Exercise Price of	Date (Month/Day/Year)	,	(Instr.8)	Number of Derivativ Securities Acquired (A) or	;
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				of (I (Inst 4, ar			
		Code	v	(A)	(D)	Date Exercisable	Expiration Date

Table IIC ontinued - Derivative Securities Acquired, Disposed of or Beneficial ly Owned

(e.g., puts, calls, warrants, options, convertible securities)

7. Title and				
Amount of				
Underlying	8. Price of	9.Number of Derivative	10. Ownership Form of	11. Nature of
Securities (Instr. 3	Derivative	Securities Beneficially Owned	Derivative Securities	Indirect Beneficial
and 4)	Security (Instr.	Following Reported	Beneficially Owned at End	Ownership (Instr.
Amount or	5)	Transaction(s) (Instr. 4)	of Month (Instr. 4)	4)
Number of				
Title Shares				

Explanation of Responses:

/ s / Larry E. LaPlante 10/3/02

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**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).

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** 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.

LIMITED POWER OF ATTORNEY

K N O W A L L P E R S O N S B Y T H E S E P R E S E N T S,

THAT the undersigned has made, constituted and appointed, and does make, constitute and appoint any of

L.E. LaPlante , K.A. Tornquist , or M.A. Thibodeau his/her true and lawful attorney-in-fact and agent, with full power of substitution and resubstitution for him/her and in his/her name, place and stead, in any and all capacities to complete, execute and deliver for filing with the U.S. Securities and Exchange Commission (the "SEC") and any other governmental agency or stock exchange deemed appropriate by said attorney, any Form 4 (or any successor form thereto) of the SEC, with all exhibits thereto, and other documents in connection therewith, for changes in beneficial ownership of stock of Maine Public Service Company, a Maine corporation ("MPS") resulting from (a) MPS' Stock Plan for Outside Directors, or (b) any other change in his/her beneficial ownership of MPS stock for which the undersigned has given any written or oral notice to MPS, hereby ratifying and confirming whatsoever said attorney, or his/her substitute or substitutes shall do by authority hereof.

This power of attorney shall survive the death or disability of the undersigned.

/s/ Lance A. Smith

Lance A. Smith Dated: 9/6/02