FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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0.5

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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).

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

N EBE	N S							er or Trac	lina S	Symbol			5	Relationsh	in of Reportin	a Person(s) t	Issuer			
(Firs			1. Name and Address of Reporting Person* MOULTON EBEN S					2. Issuer Name and Ticker or Trading Symbol UNITIL CORP [UTL]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
•		WOOLION LDLIN 3												X Dire	ctor	109	6 Owner			
	(Last) (First) (Middle) 6 LIBERTY LANE WEST				3. Date of Earliest Transaction (Month/Day/Year) 09/01/2011									Offic belo	er (give title w)	Oth belo	er (specify ow)			
(Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
NH] [3842													m filed by One Reporting Person					
(Sta	ite) (Zip)													re than One F	eporting				
(-1		—·F7																		
	Tabl	e I - Nor	n-Deriv	ative	Sec	curitie	s Acc	uired,	Dis	posed o	f, or	Bene	ficia	lly Own	ed					
Date				Day/Year) if a		Execution Date, if any		Transaction Disposed Code (Instr. 5)					d Secur Benef Owne	ities icially d Following	Form: Direct	of Indirect				
								Code	v	Amount		A) or O)	Price	Trans	action(s)		(111511.4)			
Common stock, no par value 09				9/01/2011				P		2,268	3 A \$2		\$25	.6 20,000		D				
	Та													Owned						
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Explanation of Responses:

/s/ Eben S. Moulton

09/06/2011

** 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.