SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

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

1. Name and Address of Reporting Person*	2. Date of Event Requiring Stateme (Month/Day/Year) 01/13/2005		3. Issuer Name and Ticker or Trading Symbol <u>UNITIL CORP</u> [UTL]					
(Last) (First) (Middle) 6 LIBERTY LANE WEST			4. Relationship of Reporting Pers (Check all applicable) X Director	on(s) to Issue 10% Owne	r (Mo	5. If Amendment, Date of Original Filed (Month/Day/Year)		
(Street) HAMPTON NH 03842	_		Officer (give title below)	Other (spe below)		licable Line) K Form filed b	t/Group Filing (Check ny One Reporting Person ny More than One Person	
(City) (State) (Zip)								
	Table I - Non-	Derivativ	ve Securities Beneficial	ly Owned				
1. Title of Security (Instr. 4)			Amount of Securities eneficially Owned (Instr. 4)			I. Nature of Indirect Beneficial Ownership Instr. 5)		
Common stock, no par value			0	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
1. Title of Derivative Security (Instr. 4)	2. Date Exercis Expiration Dat (Month/Day/Ye	e	3. Title and Amount of Secur Underlying Derivative Secur		4. Conversion or Exercise	cise Form: f Direct (D) ive or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
Explanation of Responses:		Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security			

/s/ Robert V. Antonucci ** Signature of Reporting Person

Date

01/19/2005

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 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.

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.