FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Was	hington,	D.C.	20549
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Washington, D.S. 20040	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0		
OTATEMENT OF STATISES IN BEINE FORE OWNERSHIP	Estimated average burden			

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

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

ONB APPROVAL									
OMB Number:	3235-0287								
Estimated average I	ourden								
hours per response:	0.5								

1. Name and Address of Reporting Person* SCHOENBERGER ROBERT G						2. Issuer Name and Ticker or Trading Symbol UNITIL CORP [UTL]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
SCHUENBERGER RUBERT G					[012]									X	X Director			10% Owner				
(Last)	(Fii ΓΥ LANE '	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/06/2008									X	Offic belov			(specify			
O DIDERT I DAINE WEST																						
(Street)					4. If	Amer	ndment,	, Date o	of Original	Filed	(Month/Da	ay/Yea	ar)		_ine)		r Joint/Group					
HAMPTO	ON NI	-1 0	3842									X Form filed by One Reporting Person										
(City)	(St	ate) (2	Zip)													Forn Pers	n filed by Mor on	re than (One Rep	orting		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3)			Date	te onth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			4 and Secu Bene Owne		cially d Following	6. Own Form: (D) or I (I) (Inst	Direct ndirect	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount		(A) or (D)	Pric	e	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common stock, no par value				02/06	02/06/2008				A		5,500		A	\$) ⁽¹⁾	0			D			
Common stock, no par value				02/11	/11/2008				J ⁽²⁾		825		A	\$28.49		35,904.826]	D			
Common stock, no par value															3,0		3,005.958 ⁽³⁾		I	Held in trust		
		Та									sed of, onvertib					wned						
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) 6. Derivative Security 3. Transaction Date Execution (Month/Day/Year) 6. Derivative Security				Date, Transactio			on of		6. Date E Expiratio (Month/D	n Dat	Amount of		str. 3	Deri Sec	rice of vative urity tr. 5)	9. Number o derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ow For Dire or I (I) (nership	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code V		(A)	(D)	Date Exercisa	Date E Exercisable [Title	or Nur of	ount mber ires								

Explanation of Responses:

- 1. Shares were granted pursuant to the Unitil Corporation Restricted Stock Plan. Shares will vest 25% per year over four years from date of grant. Shares will be valued at current market price on date of vesting.
- 2. Shares granted pursuant to the Unitil Corporation Restricted Stock Plan on February 9, 2007. Shares represent 25% of total grant and vested on Monday, February 11, 2008. The terms of the Unitil Corporation Restricted Stock Plan specify valuation at the time of vesting. Vested shares are unrestricted and fully transferable by owner.
- 3. Shares are held in trust under the terms of the Unitil Corporation Tax Deferred Savings and Investment Plan.

/s/ Robert G. Schoenberger 02/12/2008

** 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.