#### ECKERT THOMAS D Form 3 January 28, 2010 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB

### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 OMB APPROVAL

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(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> ECKERT THOMAS D		3. Issuer Name and Ticker or Trading Symbol Chesapeake Lodging Trust [CHSP]				
, , , , , , , , , , , , , , , , , , ,	01/27/2010	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
C/O CHESAPEAKE LODGING TRUST, 710 ROUTE 46 EAST, SUITE 206 (Street)		XDirector1 Officer0		10% Owner Other 6. Individual or Joint/0		
IÂ 07004					Person Form filed by More than One Reporting Person	
e) (Zip)	Table I - N	Non-Derivati	ive Securiti	es Bei	neficially Owned	
			3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owner (Instr.	-	
ficially owned.	0		D	Â		
rectly. Persons who resp nformation conta equired to respon	oond to the collection of ined in this form are not nd unless the form displ		EC 1473 (7-02)	)		
	PMAS D (Middle) KE LODGING OUTE 46 6 et) JÂ 07004 e) (Zip) eficially owned. a separate line for ea rectly. Persons who resp nformation conta- required to respo	Statement    DMAS D  (Month/Day/Year)    (Middle)  01/27/2010    KE LODGING  0    DUTE 46  6    6  e)  (Zip)    Table I - N  2. Amount o    Beneficially (Instr. 4)  9    eficially owned.  0    erectly.  0    Persons who respond to the collection of nformation contained in this form are not	Statement  Chesapeake    DMAS D  (Month/Day/Year)    (Middle)  01/27/2010    t)  (Middle)    01/27/2010  4. Relationship Person(s) to Is    KE LODGING  (Check    0  (Check    6 XDirector Officer    et)  (Zip)  Table I - Non-Derivati    2. Amount of Securities Beneficially Owned (Instr. 4)  Statement    eficially owned.  0    ethicially owned.  0    ethicially owned.  0    ethicially owned.  0	Statement  (Month/Day/Year)  Chesapeake Lodging T    0MAS D  (Month/Day/Year)  4. Relationship of Reporting Person(s) to Issuer    KE LODGING  (Check all applicable)    0 Officer Other    at) Officer Other    at) Officer Other    (give title below)  (specify below)  (specify below)    JÂ 07004  Z. Amount of Securities  3.    Beneficially Owned  Ownership  Ownership    (Instr. 4)  Form:  Direct (D) or Indirect    Direct (D)  Officer  0    of Indirect  Direct (D) or Indirect  Direct (D) or Indirect    (I)  (Instr. 5)  Direct (D) or Indirect  Direct (D) or Indirect    Strength  0  D  D    At separate line for each class of securities beneficially rectly.  SEC 1473 (7-02    Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a  SEC 1473 (7-02	Statement  Officer  Chesapeake Lodging Trust [C    0MAS D  (Month/Day/Year)  4. Relationship of Reporting Person(s) to Issuer    KE LODGING  (Check all applicable)    0	

#### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
			Derivative	Security:	

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Date Eveneisable	Expiration	Title	Amount or	Security	Direct (D)
Exercisable	Date		Number of		or Indirect
			Shares		(I)
					(Instr. 5)

# **Reporting Owners**

Reporting Owner Name / Address		Relationships				
		Director	10% Owner	Officer	Other	
ECKERT THOMAS D C/O CHESAPEAKE LODGING TRUST 710 ROUTE 46 EAST, SUITE 206 FAIRFIELD, NJ 07004		ÂX	Â	Â	Â	
Signatures						
/s/ Thomas D. Eckert	01/28/2010					
<u>**</u> Signature of Reporting Person	Date					

# **Explanation of Responses:**

\* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.