Chesapeake Lodging Trust Form 4 January 30, 2015

FORM 4

OMB APPROVAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Washington, D.C. 20549

OMB Number: 3235-0287

Expires: January 31, 2005

Estimated average burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

Check this box

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

2. Issuer Name and Ticker or Trading

1(b).

Cumulative Redeemable

(Print or Type Responses)

1. Name and Address of Reporting Person *

VICARI DOUGLAS W (Last) (First) (Middle) C/O CHESAPEAKE LODGING TRUST, 1997 ANNAPOLIS EXCHANGE PKWY, STE 410				Symbol	Symbol Chesapeake Lodging Trust [CHSP]				Issuer			
				3. Date of Ea (Month/Day)	3. Date of Earliest Transaction (Month/Day/Year) 01/28/2015					(Check all applicable) _X_ Director 10% Owner _X_ Officer (give title Other (specify below) EVP, CFO & Treasurer		
(Street) ANNAPOLIS, MD 21401					Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _ Form filed by More than One Reporting Person			
	(City)	(State)	(Zip)	Table I	- Non-Der	rivative Se	curiti	es Acqui	red, Disposed of,	or Beneficial	ly Owned	
	1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	Year) E	A. Deemed xecution Date, if ny Month/Day/Year)	eution Date, if Transaction(A) or Disposed of (I Code (Instr. 3, 4 and 5)		d of (D)	Beneficially Form: Owned Direct (D Following or Indirect Reported (I) Transaction(s) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
	Common Shares of Beneficial Interest (1)	01/28/2015			Code V	Amount 3,795	(D)	Price \$ 37.92	(Instr. 3 and 4) 301,563	D		
	Common Shares of Beneficial Interest (1)	01/29/2015			F	3,902	D	\$ 38.52	297,661	D		
	Series A								7,000	D		

Preferred Shares

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

SEC 1474

(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transaction	5. orNumber	6. Date Exerc Expiration D		7. Tit		8. Price of Derivative	9. Nu Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Unde	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	rities	(Instr. 5)	Bene
	Derivative				Securities			(Instr	. 3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Data	E		or		
						Date Expiration Exercisable Date	Expiration	Title N	Number		
								of			
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
toporting of their rand, radicion	Director	10% Owner	Officer	Other		
VICARI DOUGLAS W C/O CHESAPEAKE LODGING TRUST 1997 ANNAPOLIS EXCHANGE PKWY, STE 410 ANNAPOLIS MD 21401	X		EVP, CFO & Treasurer			

Signatures

/s/ Graham J. Wootten, Attorney-in-Fact 01/30/2015

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- (1) Represents shares surrendered to the issuer to satisfy withholding taxes owed upon the vesting of restricted common shares.

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.

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