### Edgar Filing: Willis Peter - Form 4

| Willis Peter<br>Form 4   |   |   |                               |                          |   |  |   |  |  |  |
|--|---|---|-------------------------------|--------------------------|---|--|---|--|--|--|
| December 14,   | 2010  |   |                               |                          |   |  |   |  |  |  |
| FORM<br>Check this   | OMB<br>Number:  | PROVAL<br>3235-0287                             |                               |                          |   |  |   |  |  |  |
| Check this box<br>if no longer<br>subject to<br>Section 16.<br>Form 4 or<br>Form 5<br>obligations<br>may continue.<br>See Instruction<br>1(b).<br>Check this box<br>if no longer<br>subject to<br>Section 16.<br>Form 5<br>obligations<br>may continue.<br>See Instruction<br>1(b).<br>Check this box<br>if no longer<br>subject to<br>Section 16.<br>Form 5<br>obligations<br>may continue.<br>See Instruction<br>1(b).<br>Check this box<br>if no longer<br>subject to<br>Section 16.<br>Form 5<br>obligations<br>may continue.<br>Section 17(a) of the Public Utility Holding Company Act of 1935 or Section<br>1(b).<br>Check this box<br>if no longer<br>subject to<br>Section 16.<br>Section 17.<br>Section 16.<br>Section 16.<br>Section 17.<br>Section 17.<br>Section 17.<br>Section 17.<br>Section 16.<br>Section 17.<br>Section 16.<br>Section 16.<br>Section 16.<br>Section 17.<br>Section 17.<br>Secti |   |   |                               |                          |   |  |   |  |  |  |
| (Print or Type Responses)  |   |   |                               |                          |   |  |   |  |  |  |
| 1. Name and Ad<br>Willis Peter   | dress of Reporting Person <u>*</u>                                  | 2. Issuer Name and<br>Symbol<br>Chatham Lodging |                               |                          | 5. Relationship of I<br>Issuer  | Reporting Pers   | on(s) to  |  |  |  |
| (Last)   | (First) (Middle)  | 3. Date of Earliest Tra                         | _                             |                          | (Check  | all applicable   | )   |  |  |  |
| (Month/Day/Year) Director 1  |   |   |                               |                          |   |  | Owner<br>r (specify<br>Dfficer                                    |  |  |  |
| (Street) 4. If Amendment, Date Original 6. Individual or Join<br>Filed(Month/Day/Year) Applicable Line)<br>_X_ Form filed by One   |   |   |                               |                          |   |  |   |  |  |  |
| PALM BEACH, FL 33480 Form filed by More than One Reporting<br>Person   |   |   |                               |                          |   |  |   |  |  |  |
| (City)   | (State) (Zip)   | Table I - Non-De                                | erivative Sec                 | urities Acqu             | ired, Disposed of,  | or Beneficial  | y Owned   |  |  |  |
| 1.Title of<br>Security<br>(Instr. 3)   | 2. Transaction Date 2A. D<br>(Month/Day/Year) Execu<br>any<br>(Mont |   | or(A) or Disp<br>(Instr. 3, 4 | • • • •                  | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Japan 2 and 4) | 6.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |  |
| COMMON   |   | Code V  | Amount                        | (D) Price                | (Instr. 3 and 4)  |  |   |  |  |  |
| COMMON<br>SHARES   | 12/13/2010  | Р   | 300 A                         | A <sup>\$</sup><br>16.89 | 10,750  | D  |   |  |  |  |
| COMMON<br>SHARES   | 12/13/2010  | Р   | 100 A                         | A \$16.9                 | 10,850  | D  |   |  |  |  |
| COMMON<br>SHARES   | 12/13/2010  | Р   | 400 A                         | A <sup>\$</sup><br>17.01 | 11,250  | D  |   |  |  |  |
| COMMON<br>SHARES   | 12/13/2010  | Р   | 400 A                         | A \$17                   | 11,650  | D  |   |  |  |  |
| COMMON<br>SHARES   |   |   |                               |                          | 11,650  | D  |   |  |  |  |

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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.

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

| 1. Title of | 2.          | 3. Transaction Date | 3A. Deemed         | 4.         | 5.         | 6. Date Exerc | cisable and   | 7. Titl      | le and   | 8. Price of | 9. Nu  |
|-------------|-------------|---------------------|--------------------|------------|------------|---------------|---------------|--------------|----------|-------------|--------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transactio | onNumber   | Expiration D  | ate           | Amou         | int of   | Derivative  | Deriv  |
| Security    | or Exercise |                     | any                | Code       | of         | (Month/Day/   | Year)         | Under        | rlying   | Security    | Secu   |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8) | Derivative | e             |               | Secur        | ities    | (Instr. 5)  | Bene   |
|             | Derivative  |                     |                    |            | Securities |               |               | (Instr.      | 3 and 4) |             | Owne   |
|             | Security    |                     |                    |            | Acquired   |               |               |              |          |             | Follo  |
|             |             |                     |                    |            | (A) or     |               |               |              |          |             | Repo   |
|             |             |                     |                    |            | Disposed   |               |               |              |          |             | Trans  |
|             |             |                     |                    |            | of (D)     |               |               |              |          |             | (Instr |
|             |             |                     |                    |            | (Instr. 3, |               |               |              |          |             |        |
|             |             |                     |                    |            | 4, and 5)  |               |               |              |          |             |        |
|             |             |                     |                    |            |            |               |               |              |          |             |        |
|             |             |                     |                    |            |            |               |               |              | Amount   |             |        |
|             |             |                     |                    |            |            | Date          | Expiration    | <b>T</b> '4  | or       |             |        |
|             |             |                     |                    |            |            | Exercisable   | rcisable Date | Title Number |          |             |        |
|             |             |                     |                    |            | (A) (D)    |               |               |              | of       |             |        |
|             |             |                     |                    | Code V     | (A) (D)    |               |               |              | Shares   |             |        |

## **Reporting Owners**

| Reporting Owner Name / Address                                     | Relationships |            |                                |       |  |  |  |
|--|---------------|------------|--------------------------------|-------|--|--|--|
|  | Director      | 10% Owner  | Officer                        | Other |  |  |  |
| Willis Peter<br>50 COCOANUT ROW, SUITE 200<br>PALM BEACH, FL 33480 |               |            | EVP & Chief Investment Officer |       |  |  |  |
| Signatures   |               |            |                                |       |  |  |  |
| /s/Dennis M Craven As Attorney<br>In Fact                          |               | 12/14/2010 |                                |       |  |  |  |

Date

## **Explanation of Responses:**

\*\*Signature of Reporting Person

\* 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. 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.