Pepper David A Form 4/A August 17, 2012

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

January 31, Expires: 2005

Form 5 obligations **SECURITIES**

Estimated average burden hours per response... 0.5

may continue. See Instruction

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

1(b).

Common

Common

Stock

Stock

02/20/2011

(Print or Type Responses)

| 1. Name and Ad Pepper David | g Person * | Symbol CHOICE | E HOTEL | Ticker or Trading S AL INC /DE [CHH] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
|--------------------------------------|--------------------------------------|---|---------------------------------|---|--|--|--|---|
| (Last) | (First) JMBIA PIKE | 3. Date of Earliest Transaction (Month/Day/Year) 02/20/2011 | | | Director 10% Owner Senior Vice President Other (specify below) | | | |
| SILVER SPF | 01 | 4. If Amendment, Date Original Filed(Month/Day/Year) 02/23/2011 | | | 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-De | erivative Securities Acq | uired, Disposed o | of, or Beneficial | lly Owned |
| 1.Title of Security (Instr. 3) | 2. Transaction Da (Month/Day/Year | r) Execution | med on Date, if Day/Year) | 3. Transaction Code (Instr. 8) | (Instr. 3, 4 and 5) | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |

Code V

A

(A)

(D)

A

Price

\$0

Amount

6,867

(1)

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

I

Transaction(s) (Instr. 3 and 4)

48,200.49 (1)

577

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

401(k)

Plan

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

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. Number of or Derivative Securities Acquired (A) or Disposed (D) (Instr. 3, 4, and 5) | Expiration I (Month/Day | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|---|---|---|---|--|---|-------------------------|--|-----------------|---|--|
| | | | | Code V | (A) (E | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Employee Stock Option | \$ 41.25 | 02/20/2011 | | A | 12,402 | (2) | 02/20/2018 | Common Stock | 12,402 | |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Pepper David A

10750 COLUMBIA PIKE Senior Vice President SILVER SPRING, MD 20901

Signatures

Bret L. Limage, attorney

in fact 08/17/2012

**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) This amendment is filed solely to correct the number of shares acquired in the reported transaction and also the number of securities shown as beneficially owned by the reporting person following the reported transaction.
- (2) Options vest in four equal installments beginning on the first anniversary of the grant date.

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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