## Edgar Filing: Pacious Patrick - Form 4

| Form 4  |                                   |                     |   |   |  |                              |  |  |   |                           |  |  |
|---|-----------------------------------|---------------------|---|---|--|------------------------------|--|--|---|---------------------------|--|--|
| WaCheck this box<br>if no longer<br>subject to<br>Section 16.<br>Form 4 or<br>Form 5STATEMENT OF CHAN |                                   |                     |   | RITIES AND EXCHANGE COMMISSION<br>shington, D.C. 20549<br>NGES IN BENEFICIAL OWNERSHIP OF<br>SECURITIES |  |                              |  |  | OMB APPROVAL<br>OMB 3235-0287<br>Number: January 31,<br>2005<br>Estimated average<br>burden hours per<br>response 0.5 |                           |  |  |
| obligation<br>may cont<br><i>See</i> Instru<br>1(b).  | inue. Section                     |                     | Public Ut ) of the In                     | •   | •                                      | · ·                          |  | 1935 or Section<br>0   | 1   |                           |  |  |
| (Print or Type I  | Responses)                        |                     |   |   |  |                              |  |  |   |                           |  |  |
| (   |                                   |                     | Symbol<br>CHOIC                           | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>CHOICE HOTELS<br>INTERNATIONAL INC /DE [CHH]   |  |                              |  |  | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)   |                           |  |  |
| (Last)  | (First)<br>UMBIA PIKE             | (Middle)            | 3. Date of<br>(Month/D<br>02/14/20        | -   | ansaction                              |                              |  | Director<br>X Officer (give<br>below)<br>Senior  |   | Owner<br>er (specify<br>t |  |  |
|   |                                   |                     | nendment, Date Original<br>onth/Day/Year) |   |  |                              | <ul> <li>6. Individual or Joint/Group Filing(Check<br/>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul> |  |   |                           |  |  |
| SILVER SP   | RING, MD 20                       | 901                 |   |   |  |                              |  | Person   | lore than One Re  | porung                    |  |  |
| (City)  | (State)                           | (Zip)               | Tabl                                      | e I - Non-D   | erivative                              | Secur                        | ities Acq  | uired, Disposed of   | , or Beneficial   | ly Owned                  |  |  |
| 1.Title of<br>Security<br>(Instr. 3)  | 2. Transaction I<br>(Month/Day/Ye | ear) Executi<br>any | emed<br>on Date, if<br>/Day/Year)         | 3.<br>Transactio<br>Code<br>(Instr. 8)  | 4. Securit<br>n(A) or Di<br>(Instr. 3, | sposed<br>4 and<br>(A)<br>or | d of (D)<br>5)   | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4)  |                           |  |  |
| Common<br>Stock   | 02/14/2012                        |                     |   | Code V<br>F   | Amount<br>265                          | (D)<br>D                     | Price<br>\$<br>35.67   | 26,899   | D   |                           |  |  |

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)

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| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5.<br>orNumber<br>of<br>Derivatives<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, |                     | ate                | 7. Titl<br>Amou<br>Under<br>Secur<br>(Instr. | int of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---|--|---|---------------------|--------------------|--|--|---|--|
|   |   |   |   | Code V                                 | 4, and 5)<br>(A) (D)  | Date<br>Exercisable | Expiration<br>Date | Title  | Amount<br>or<br>Number<br>of<br>Shares |   |  |

## **Reporting Owners**

| <b>Reporting Owner Name / Address</b>                             | Relationships |           |                       |       |  |  |  |
|---|---------------|-----------|-----------------------|-------|--|--|--|
|   | Director      | 10% Owner | Officer               | Other |  |  |  |
| Pacious Patrick<br>10750 COLUMBIA PIKE<br>SILVER SPRING, MD 20901 |               |           | Senior Vice President |       |  |  |  |
| Signatures  |               |           |                       |       |  |  |  |
| Bret L. Limage, attorney in fact                                  | 02/1          | 6/2012    |                       |       |  |  |  |
| **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).

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.