FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response	: 0.5								

	tion 1(b).			Filed							ties Exchang mpany Act o		1934		Hours	per re	esponse:	0.5
1. Name and Address of Reporting Person* HUDSON DENNIS S III				2. Issuer Name and Ticker or Trading Symbol CHESAPEAKE UTILITIES CORP CPK								5. Relationship of Report (Check all applicable) X Director Officer (give title			rson(s) to Is 10% O Other (wner		
(Last) (First) (Middle) P. O. BOX 9012 815 COLORADO AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 05/05/2021								belov			below)	specify		
(Street) STUAR:			4995-9 Zip)	9012	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Che Line) X Form filed by One Reporting I Form filed by More than One Person									porting Pers	on			
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	quired	, Dis	posed of	i, or Be	enefic	ially Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Disposed Of 5)					nd Securi Benefi	ities Fo icially (D d Following (I)		wnership m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	Transa	action(s) . 3 and 4)			(111341. 4)
Common	Stock			05/05/2	021				A ⁽¹⁾		683	A	\$117	.17.11 15,168 D				
	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)	tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			Transaction of Code (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)			Amount of De Securities Se		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Joned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Date Exercisable

Expiration Date

Explanation of Responses:

1. Shares issued under Chesapeake's Director Stock Compensation Plan

Remarks:

/s/ Dennis S. Hudson, III

of Shares

Title

05/07/2021

** Signature of Reporting Person Date

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

- * 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.

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 Number.

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