The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

Washington, D.C. 2059 FOR JO     Discussion of the second of	U	NITED STATES SECURIT		E COMMISSION	OMB APPROVAL
Notice of Exempt Offering of Securities     Item an approach     1       1. Issuer's Identity     Previous Name of Issuer     Entity Type     Entity Type       CIK (Filer: ID Number)     Previous Name of Issuer     Entity Type     Entity Type       CIKA: Filer: ID Number)     Previous Name of Issuer     Entity Type     Entity Type       CIKA: Filer: ID Number)     Previous Name of Issuer     Entity Type     Entity Type       CIKA: REDOCE BANCORP INC VIRGINA     Entity Type     Entity Type       VIRGINA     Entity Type     Entity Type       Within Last Five Years Ago     United Partnership       Within Last Five Years Ago     Business Trust       Within Last Five Years Ago     Business Trust       Virk UB & Foremed     Street Address 2       2. Frincipal Place of Business and Contact Information     Mode Name       Name of Issuer     First Name     Middle Name       CIKA: Street Address 2     G.       Cita Name (Issuer)     Previous County     ZIPPostalCode       Cita Name (Issuer)     Previous County     ZIPPostalCode       Cita Name (Issuer)     Street Address 2     G.		Washi			OMB Number: 3235-0076
Notice of Exempt Offering of Securities         1. issuer's identity         Cik (Filer ID Number)       Previous Name of Issuer         Vaco Id NorporationOrganization       Business Trust         Over Five Years Age Within Last Five Years (Specify Year)       Business Trust         Vato Be Formed       Storet Address 2         2. Principal Place of Business and Contact Information       Name of Issuer         CikAn NERDER HANCORP INC       Storet Address 2         Storet Address 1       Storet Address 2         Last A LAG(IN NA VINU)       Storef Address 2         CikAn Heige Issuery, Inc.       Id Staref CikAnset Address 2         Cik (Last Name       First Name       Middle Name         First Name       Middle Name         Cik In Heige Issuery, Inc.       Id Staref Address 2         Cik In Heige Issuery, Inc.       Id Staref Address 2         Cik In Heige Issuery, Inc.       Id Staref Address 2					-
CK (Filer ID Number)       Previous Names       None       Entity Type         G001392272 Name of Issuer       Corporation       Initial RANCRP INC         Allow REDGE BANCORP INC       Initial RANCORP INC       Initial Company         Jurisdiction of Incorporation/Organization       Initial Rancore Incorporation/Organization       Initial Company         VRICINA       Seneral Partnership       Initial Company         Very Into Las Free Years (Specify Year)       Initial Street Address 1       Street Address 2         1455-ALCORELIN AVENUE       Street Address 2       Phone Number of Issuer         City       StalePrevious/Country       ZIPPostalCode       Country         Street Address 1       Street Address 2       Country       ZIPPostalCode		Notice of Exem	pt Offering of Secu	rities	hours per response: 4.00
Citk (Filer ID Number)       Previous Names       None       Entity Type         Odd1392272       Name of Issuer       Corporation         Name of Issuer       Linited Active Statistics       Linited Pathership         Linited Catalog       General Pathership       Linited Pathership         United Pathership       Linited Linited Pathership       Linited Linited Pathership         Watch Last Five Years (Specify Year)       Street Address 1       Street Address 2         Ver of Issuer       Street Address 2       Street Address 2         Street Address 1       Street Address 2         Active Xanow       VitKINIA       2101         A Raided Pareons       Middle Name         Figure Address 1       Street Address 2         A Raided Pareons       Middle Name         City       Street Address 2       General Pathership         Active Xanow       VitKINA       2101       703-748-2005         A Raided Pareons       Middle Name       General Pathership       Middle Name         First Name       First Name       Middle Name       General Pathership         VitCan       Street Address 2       General Pathership       Linited Pathership         City       Street Address 2       General Pathership       Linited Pathership </td <td></td> <td></td> <td></td> <td></td> <td></td>					
CHC (Field DNUMBE) Names Note Entry Type OO0J392272 OO0J392272 CRAIN BADDGE BANCORP INC JURGED ANCORP INC THE SAME AND	1. Issuer's Identity				
Name of Issuer       Limited Lability Company         Other Five Years Ago       Business Trust         Other Coperation/Organization       Business Trust         With Last Five Years (Specify Year)       Other (Specify)         Other Coperation/Organization       Business Trust         Other Coperation       Business Trust         Other (Specify)       Other (Specify)         With Last Five Years (Specify Year)       Vert Ob E for mod         2. Principal Place of Business and Contact Information       Street Address 2         Name of Issuer       Street Address 2         CIAN BRIDGE BANCORP INC:       Street Address 2         Street Address 1       Street Address 2         City       State/Province/Country       ZIP/PostalCode       Phone Number of Issuer         NCLEAN       VIRGINIA       22101       703-748-2005         3. Reated Persons       State/Province/Country       ZIP/PostalCode       Virk Other State/Province/Country         City       State/Province/Country       ZIP/PostalCode       Virk Other State/Province/Country       ZIP/PostalCode         City       State/Province/Country       ZIP/PostalCode       Virk Other State/Province/Country       ZIP/PostalCode         City       State/Province/Country       ZIP/PostalCode       Virk Other State/Provin	CIK (Filer ID Number)		X None	Entity Type	
Name of Issuer          CHANN BRIDGE RANCORP INC:       Linited Partnership         VIRKUNIA       Linited Dartnership         Serier of Incorporation/Organization       Linited Dartnership         VIRKUNIA       Business Trust         Serier of Incorporation/Organization       Linited Partnership         Within Last Five Years Ago       Dother (Specify)         Within Last Five Years (Specify Year)       Dother (Specify)         Yeat 0 Encorporation/Organization       Dother (Specify)         Specific RANCORP INC       Street Address 2         Last Name of Issuer       Street Address 2         CIAN NBIDGE RANCORP INC       Street Address 2         Street Address 1       Street Address 2         Last Name       First Name       Middle Name         First Name       Middle Name         First Name       VIRCINIA       22101         Street Address 1       Street Address 2         City       State/Province/Country       2/ProstalCode         Other Street Address 1       Street Address 2         Street Address 1       Street Address 2         City       State/Province/Country       2/ProstalCode         Other Street Address 1       Street Address 2         City       State/Province/Country       2/ProstalCode <td>0001392272</td> <td></td> <td></td> <td>X Corporation</td> <td></td>	0001392272			X Corporation	
CHAN BRIDGE BANCORP INC Justicition of Incorporation/Organization VIRCINA Year of Incorporation/Organization Over Five Years Ago Within Last Five Years (Specify Year) Yet to Be Formed 2. Principal Place of Business and Contact Information Name of Issuer CIANN BRIDGE BANCORP INC Street Address 1 Street Address 2 1445-A LAUCHLIN AVENUE City State/Province/County ZIP/PostalCode Phone Number of Issuer MCLEAN Related Persons 2. Related Persons 2. Related Persons 2. Related Persons 2. Street Address 2 2. Related Persons 2. Related Persons 2. Related Persons 2. Street Address 2 2. Related Persons 2. Last Name First Name Middle Name City 2. Street Address 2 2. Combin Pringe Bancorp, Inc. City State/Province/County ZIP/PostalCode Middle Name City State/Province/County 2. ZIP/PostalCode Middle Name City Street Address 1 Street Address 2 2. Combine First Name First Name First Name First Name Middle Name City State/Province/County 2. ZIP/PostalCode Middle Name City State/Province/County 2. ZIP/PostalCode Street Address 1 Street Address 2 City State/Province/Count	Name of Issuer				αίς
Julisdiction of incorporation/Organization              General Partnership             Business Trust             General Partnership             Business Trust             Gother File Years (Specify Year)             Vithin Last Five Years (Specify Year)             Vet to Be Formed          2. Principal Place of Business and Contact Information         Name of Issuer         CHANN RB/DCR BANCORP INC         Street Address 1         Street Address 2         ClV         Street Address 1         Street Address 2         ClV         Street Address 1         Street Address 2         ClV         Street Address 2         ClV         Street Address 2         Cl Chain Bridge Bancory, Inc.         Last Name         First Name         Middle Name         First Name         Middle Name         First Name         Middle Name         First Name         Middle Name         First Name	CHAIN BRIDGE BANCORP INC				
Year of Incorporation/Organization       Business Trust         Conter (Five Years Ago       Other (Specify)         Within Last Five Years (Specify Year)       Other (Specify)         Year Of Encorporation/Organization       Other (Specify)         2. Principal Place of Business and Contact Information       Street Address 2         Name of Issuer       CHAIN BRIDGE BANCORP INC         Street Address 1       Street Address 2         145-A LAUGHLIN AVENUE       CIV         City       State/Province/Country       ZIP/PostalCode         Phone Number of Issuer       Middle Name         First Name       Middle Name         First Name       Middle Name         First Name       VIRGINA       22101         Related Persons       ZiP/PostalCode       City         Last Name       First Name       Middle Name         First Name       VIRGINA       22101         Relationship: Steet Address 2       Code       Code         City       State/Province/Country       ZIP/PostalCode         Middle Name       First Name       Middle Name         Herrick       Philip       F.         Street Address 2       City       State/Province/Country       ZIP/PostalCode         Middle Name	Jurisdiction of Incorporation/Orga	nization			
Charl Five Years Ago       Charl Specify Year)         Vet to Be Formed       Charl Selfice of Business and Contact Information         Name of Issuer       Street Address 1         AtAVIES BANCORP INC       Street Address 2         Vet No Be Formed       Charl Belling Bancorp InC         Street Address 1       Street Address 2         Vet No Be Formed       Charl Belling Bancorp InC         Street Address 1       Street Address 2         Vet No Be Formed       Charl Belling Bancorp InC         Street Address 1       Street Address 2         Action Belling Bancorp Inc       First Name         Kitzer Address 1       Street Address 2         Chain Belling Bancorp Inc.       First Name         Chain Bridge Bancorp Inc.       Street Address 2         Co Chain Bridge Bancorp Inc.       ViRCINIA       22101         Relationship: Street Address 2       Contain Charles 2         Co Chain Bridge Bancorp, Inc.       First Name       Middle Name         Herrick       Philip       F.         Street Address 1       Street Address 2       Colon         Co Chain Bridge Bancorp, Inc.       First Name       Middle Name         Herrick       Philip       F.         Street Address 1       Street Address 2				General Partners	hip
Utilin Last Five Years (Specify Year)       Utilin Last Five Years (Specify Year)         Yet to Be Formed <b>2. Principal Place of Business and Contact Information</b> Name of Issuer         CHAIN BRIDGE BANCORP INC         Street Address 1         Street Address 2         I.45-A LACOFILINA VENUE         City         State/Province/Country         ZIP/PostalCode         Phone Number of Issuer         MIddle Name         Firitypernd         Peer         G.         Street Address 1         Street Address 2         e0 Chain Indige Bancorp, Inc.         I.45-A Laughtin Avenue         City         Street Address 1         Street Address 2         e0 Chain Indige Bancorp, Inc.         I.445-A Laughtin Avenue         City         Street Address 2         e0 Chain Indige Bancorp, Inc.         I.445-A Laughtin Avenue         City         Street Address 1         Street Address 2         e0 Chain Bridge Bancorp, Inc.         I.4		n		Business Trust	
Image: Second Status       Street Address 2         CHANN RRINGE RANCORPINC       Street Address 2         Street Address 1       Street Address 2         CLANN RRINGE RANCORPINC       Street Address 2         Street Address 1       Street Address 2         Clast Name       First Name       Middle Name         First Province/Country       ZIP/PostalCode       C         Street Address 1       Street Address 2       C         Chain Bridge Bancorp, Inc.       H45-A Laughtin Avenue       Clip         Clip       State/Province/Country       ZIP/PostalCode         MICLean       VIRGINIA       22101         Relationship       Executive Officer Director Promoter       First Name         Last Name       First Name       Middle Name         Herrick       Philip       F       Street Address 2         ci Chain Bridge Bancorp, Inc.       H45-A Laughtin Avenue       Clip	X Over Five Years Ago			Other (Specify)	
2. Principal Place of Business and Contact Information  Name of Issuer CIANN BRIGGE BANCORP INC  Street Address 1  Street Address 2  I45-A LAUGHLIN AVENUE  City State/Province/Country ZIP/PostalCode Phone Number of Issuer  MCLEAN VIRGINA 22101 703-748-2005  3. Related Persons  Last Name First Name Middle Name Firster Address 2  co Chain Bridge Bancorp, Inc. I445-A Laughlin Avenue City State/Province/Country ZIP/PostalCode  VIRGINA 22101 Relationship: Secutive Officer Director Promoter  City State/Province/Country ZIP/PostalCode  VIRGINA 22101 Relationship: Secutive Officer Director Promoter  City State/Province/Country ZIP/PostalCode  VIRGINA 22101 Relationship: Secutive Officer Director Promoter  City State/Province/Country ZIP/PostalCode  City State/Provinc	Within Last Five Years (Specif	y Year)			
Name of Issuer       Street Address 1       Street Address 2         1445.A LACIOLINA VIEUE       E         City       State/Province/Country       ZIP/PostalCode       Phone Number of Issuer         MCLEAN       VIRGINIA       22101       703-748-2005         A cleated Persons         A cleated Persons         A cleated Persons         Address 1       Street Address 2         G.         Cleation of Response (if Necessary):         Middle Name         Middle Samoon, Inc.       1445-A Laughim Avenue         Cleation of Response (if Necessary):         Last Name       First Name       Middle Name         Herrick       Philip       F.       Street Address 2       Colspan="2">Colspan=Code         Clain Ender Middle Same       Ying CliA       Z10/PostalCod	Yet to Be Formed				
CHAIN BRIDGE BANCORP INC Street Address 1       Street Address 2         Street Address 1       State/Province/Country       ZIP/PostalCode       Phone Number of Issuer         MCLEAN       VIRGINIA       22101       703-748-2005         A Related Persons         Last Name       First Name       Middle Name         Firsgenid       Peter       G.         Street Address 1       Street Address 2       c         c/o Chain Bridge Bancorp, Inc.       1445-A Laughlin Avenue       CI         City       State/Province/Country       ZIP/PostalCode         VIRGINIA       22101       703-748-2005         Colspan="2">Street Address 2         Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan= 2"Colspan="2">Colspan= 2"Colspan="2">Colspan= 2"Colspan="2">Colspan= 2"Colspan="2"Colsp	2. Principal Place of Business a	nd Contact Information			
Street Address 1     Street Address 2       L45A     LAUGIGILIN AVENUE       City     State/Province/Country     ZIP/PostalCode     Phone Number of Issuer       MCLEAN     VIRGINIA     22101     703-748-2005       Street Address 2       G.       Street Address 2       G.       Street Address 2       G.       Street Address 2       G.       Colspan="2">Street Address 2       G.       Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2"       Colspan= C	Name of Issuer				
1445-A LAUGHLIN AVENUE       State/Province/Country       ZIP/PostalCode       Phone Number of Issuer         MCLEAN       VIRGINIA       22101       703-748-2005         3. Related Persons        Statel Province/Country       22101       703-748-2005         3. Related Persons        G.       Street Address 1       Street Address 2       G.         Street Address 1       Street Address 2       G.       Street Address 1       State/Province/Country       ZIP/PostalCode         McLean       VIRGINIA       22101       22101       Street Address 2       G.         Claiffication of Response (if Necessary):       ZIP/PostalCode       ZIP/PostalCode       Street Address 2       G.         Last Name       First Name       Middle Name       First Name       Middle Name       Street Address 2       G.         Clarification of Response (if Necessary):        ZIP/PostalCode       ZIP/PostalCode       G.         Last Name       First Name       Middle Name       First Name       Middle Name       G.         Herrick       Philip       F.       Street Address 2       G.       G.         City       State/Province/Country       ZIP/PostalCode       ZIP/PostalCode       ZIP/PostalCode       ZIP/PostalCode	CHAIN BRIDGE BANCORP INC				
City     State/Province/Country     ZIP/PostalCode     Phone Number of Issuer       MCLEAN     VIRGINIA     22101     703-748-2005       S. Related Persons     State/Portine Country     G.       Last Name     First Name     Middle Name       Fitzgerald     Peter     G.       Street Address 1     Street Address 2     G.       eto Chain Bridge Bancorp, Inc.     1445-A Laughtin Avenue     ZIP/PostalCode       City     State/Province/Country     ZIP/PostalCode       McLean     VIRGINIA     22101	Street Address 1		Street Address 2		
MCLEAN     VIRGINIA     22101     703-748-2005       S. Related Persons     Last Name     First Name     Middle Name       Firzgerald     Peter     G.       Street Address 1     Street Address 2     G.       of Chain Bridge Bancorp, Inc.     1445-A Laughlin Avenue     Cily       City     State/Province/Country     ZIP/PostalCode       McLean     VIRGINIA     22101       Relationship: Texecutive Officer Director Promoter     Promoter       Clarification of Response (if Necessary):     Image: Street Address 2       Co' Chain Bridge Bancorp, Inc.     First Name     Middle Name       Herrick     Philip     F.       Street Address 2     Ci/PiPostalCode       City     State/Province/Country     ZIP/PostalCode       McLean     VIRGINIA     22101       Relationship: Executive Officer Director Promoter     F.       City     State/Province/Country     ZIP/PostalCode       McLean     VIRGINIA     22101       Relationship: Executive Officer Director Promoter     Image: Street Address 2       City     State/Province/Country     ZIP/PostalCode       McLean     VIRGINIA     22101	1445-A LAUGHLIN AVENUE				
3. Related Persons         Last Name       First Name       Middle Name         Fitzgerald       Peter       G.         Street Address 1       Street Address 2         e'o Chain Bridge Bancorp, Inc.       1445-A Laughin Avenue         City       State/Province/Country       ZIP/PostalCode         McLean       VIRGINIA       22101         Relationship: \[\] Executive Officer \[\] Director \[] Promoter       Promoter         Clarification of Response (if Necessary):	City	State/Province/Country	ZIP/PostalCode	Phone Number of I	ssuer
Last Name     First Name     Middle Name       Last Name     First Name     Middle Name       Street Address 1     Street Address 2     G.       Street Address 1     Street Address 2     G.       City     State/Province/Country     ZIP/PostalCode       McLean     VIRGINIA     22101       Relationship:     Executive Officer I Director Promoter     Promoter       Clarification of Response (if Necessary):     Ital Name     First Name       Herrick     Philip     F.       Street Address 1     Street Address 2     Colonia Bridge Bancorp, Inc.       City     State/Province/Country     ZIP/PostalCode       McLean     VIRGINIA     22101	MCLEAN	VIRGINIA	22101	703-748-2005	
FitzgeraldPeterG.Street Address 1Street Address 2c/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueCityState/Province/CountryZIP/PostalCodeMcLeanVIRGINIA22101Relationship: X Executive Officer Director PromoterPromoterClarification of Response (if Necessary):Image: Street Address 2c/o Chain Bridge Bancorp, Inc.1445-A Laughlin Avenuec/o Chain Bridge Bancorp, Inc.1445-A Laughlin Avenuec/o Chain Bridge Bancorp, Inc.1445-A Laughlin Avenuec/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueCityState/Province/CountryZIP/PostalCodeMcLeanVIRGINIA2101Relationship: Director PromoterImage: Street Address 2c/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueCityState/Province/CountryZIP/PostalCodeMcLeanVIRGINIA2101Relationship: Director PromoterImage: Street Address 2c/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueCityStreet Address 2c/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueCityState/Province/CountryZIP/PostalCodeMcLeanVIRGINIA2101<	3. Related Persons				
Street Address 1       Street Address 2         c/o Chain Bridge Bancorp, Inc.       1445-A Laughtin Avenue         City       State/Province/Country       ZIP/PostalCode         McLean       VIRGINIA       22101         Relationship:        Executive Officer        Director          Curification of Response (if Necessary):	Last Name	First Name		Middle Name	
c/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueCityState/Province/CountryZIP/PostalCodeMcLeanVIRGINIA22101Relationship: I Executive Officer Director PromoterPromoterClarification of Response (if Necessary):Image: State Province PromoterLast NameFirst NameMiddle NameHerrickPhilipF.Street Address 1Street Address 2c/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueCityState/Province/CountryZIP/PostalCodeMcLeanVIRGINIA22101Relationship: Executive Officer Director PromoterImage: Street Address 2c/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueCityState/Province/CountryZIP/PostalCodeMcLeanVIRGINIA22101Relationship: Executive Officer Director PromoterImage: Street Address 2c/o Chain Bridge Bancorp, Inc.First NameMiddle NameFirsGrandPeterJ.Street Address 1Street Address 2c/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueCityState/Province/CountryZIP/PostalCodeCityState/Province/CountryZIP/PostalCodeMidde RameMidde RameImage: Street Address 2c/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueCityState/Province/CountryZIP/PostalCodeMcLeanVIRGINIA22101	Fitzgerald	Peter		G.	
CityState/Province/CountryZIP/PostalCodeMcLeanVIRGINIA22101Relationship: X Executive Officer Director PromoterPromoterClarification of Response (if Necessary):	Street Address 1	Street Address 2			
McLean     VIRGINIA     22101       Relationship: X Executive Officer Director     Promoter     Virgination of Response (if Necessary):       Clarification of Response (if Necessary):	· · · · ·				
Relationship: X Executive Officer X Director Promoter         Clarification of Response (if Necessary):         Last Name       First Name       Middle Name         Herrick       Philip       F.         Street Address 1       Street Address 2       Colorian Bridge Bancorp, Inc.       1445-A Laughlin Avenue         City       State/Province/Country       ZIP/PostalCode         MeLean       VIR GINIA       2101         Relationship: Executive Officer X Director Promoter       First Name       Middle Name         Clarification of Response (if Necessary):       East Name       Middle Name         Last Name       First Name       Middle Name         FitzGerald       Peter       J.         Street Address 1       Street Address 2       City         City       State/Province/Country       ZIP/PostalCode         Last Name       First Name       Middle Name         FitzGerald       Peter       J.         Street Address 1       Street Address 2       City         City       State/Province/Country       ZIP/PostalCode         MidLean       VIR GINIA       Z1P/PostalCode			untry		
Clarification of Response (if Necessary):       Middle Name         Last Name       First Name       Middle Name         Herrick       Philip       F.         Street Address 1       Street Address 2         c/o Chain Bridge Bancorp, Inc.       1445-A Laughlin Avenue         City       State/Province/Country       ZIP/PostalCode         McLean       VIRGINIA       22101         Relationship:       Executive Officer IDirector       Promoter         Clarification of Response (if Necessary):       Image: Street Address 2       Image: Street Address 2         Last Name       First Name       Middle Name         FitzGerald       Peter       J.         Street Address 1       Street Address 2       Image: Street Address 2         c/o Chain Bridge Bancorp, Inc.       1445-A Laughlin Avenue       Image: Street Address 2         c/o Chain Bridge Bancorp, Inc.       1445-A Laughlin Avenue       Image: Street Address 2         c/o Chain Bridge Bancorp, Inc.       1445-A Laughlin Avenue       Image: Street Address 2         c/o Chain Bridge Bancorp, Inc.       1445-A Laughlin Avenue       Image: Street Address 2         c/o Chain Bridge Bancorp, Inc.       1445-A Laughlin Avenue       Image: Street Address 2         c/o Chain Bridge Bancorp, Inc.       1445-A Laughlin Avenue <td></td> <td></td> <td></td> <td>22101</td> <td></td>				22101	
Last Name     First Name     Middle Name       Herrick     Philip     F.       Street Address 1     Street Address 2       c/o Chain Bridge Bancorp, Inc.     1445-A Laughlin Avenue       City     State/Province/Country     ZIP/PostalCode       McLean     VIRGINIA     22101       Relationship:     Executive Officer     Promoter       Clarification of Response (if Necessary):     Image: Street Address 2     Image: Street Address 2       Last Name     First Name     Middle Name       FitzGerald     Peter     J.       Street Address 1     Street Address 2       c/o Chain Bridge Bancorp, Inc.     1445-A Laughlin Avenue       City     State/Province/Country     ZIP/PostalCode       Middle Name     First Name     Middle Name       FitzGerald     Peter     J.       Street Address 1     Street Address 2     Image: Street Address 2       c/o Chain Bridge Bancorp, Inc.     1445-A Laughlin Avenue     Image: Street Address 2       City     State/Province/Country     ZIP/PostalCode       McLean     VIRGINIA     22101	Relationship: X Executive Officer	X Director Promoter			
HerrickPhilipF.Street Address 1Street Address 2c/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueCityState/Province/CountryMcLeanVIRGINIARelationship:Executive Officer InformationPromoterPromoterClarification of Response (if Necessary):Last NameFirst NameFitzGeraldPeterStreet Address 1Street Address 2c/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueCityStreet Address 2c/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueCityState/Province/CountryMcLeanVIRGINIAMcLeanVIRGINIAStreet Address 1Street Address 2c/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueCityState/Province/CountryMcLeanVIRGINIAStreet Address2101	Clarification of Response (if Neces	ssary):			
Street Address 1Street Address 2c/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueCityState/Province/CountryZIP/PostalCodeMcLeanVIRGINIA22101Relationship:Executive Officer InformationPromoterClarification of Response (if Necessary):	Last Name	First Name		Middle Name	
c/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueZIP/PostalCodeCityState/Province/Country22101Relationship:Executive OfficerDirectorPromoterPromoterClarification of Response (if Necessary):	Herrick			F.	
CityState/Province/CountryZIP/PostalCodeMcLeanVIRGINIA22101Relationship:Executive Officer I DirectorPromoterClarification of Response (if Necessary):Last NameFirst NameMiddle NameFitzGeraldPeterJ.Street Address 1Street Address 2c/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueCityState/Province/CountryZIP/PostalCodeMcLeanVIRGINIA22101					
McLeanVIRGINIA22101Relationship:Executive Officer IDirectorPromoterClarification of Response (if Necessary):Last NameFirst NameMiddle NameFitzGeraldPeterJ.Street Address 1Street Address 2c/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueCityState/Province/CountryZIP/PostalCodeMcLeanVIRGINIA22101	<b>e</b> 17				
Relationship:       Executive Officer       Niprector       Promoter         Clarification of Response (if Necessary):       Image: Street Addressary       Image: Street Address 2       Image: Street Address Address 2         C/o Chain Bridge Bancorp, Inc.       1445-A Laughlin Avenue       Image: Street Address A			untry		
Clarification of Response (if Necessary):         Last Name       First Name       Middle Name         FitzGerald       Peter       J.         Street Address 1       Street Address 2         c/o Chain Bridge Bancorp, Inc.       1445-A Laughlin Avenue         City       State/Province/Country       ZIP/PostalCode         McLean       VIRGINIA       22101	_			22101	
Last NameFirst NameMiddle NameFitzGeraldPeterJ.Street Address 1Street Address 2c/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueCityState/Province/CountryZIP/PostalCodeMcLeanVIRGINIA22101	Relationship: Executive Officer	X Director Promoter			
FitzGeraldPeterJ.Street Address 1Street Address 2c/o Chain Bridge Bancorp, Inc.1445-A Laughlin AvenueCityState/Province/CountryMcLeanVIRGINIA22101	Clarification of Response (if Neces	ssary):			
Street Address 1     Street Address 2       c/o Chain Bridge Bancorp, Inc.     1445-A Laughlin Avenue       City     State/Province/Country     ZIP/PostalCode       McLean     VIRGINIA     22101	Last Name	First Name		Middle Name	
c/o Chain Bridge Bancorp, Inc.     1445-A Laughlin Avenue       City     State/Province/Country       McLean     VIRGINIA       22101	FitzGerald	Peter		J.	
City     State/Province/Country     ZIP/PostalCode       McLean     VIRGINIA     22101					
McLean VIRGINIA 22101					
	City	State/Province/Co	untry	ZIP/PostalCode	
	McLean	VIRGINIA		22101	
	_	X Director Promoter			

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Shiffman	Paul	
Street Address 1	Street Address 2	
c/o Chain Bridge Bancorp, Inc.	1445-A Laughlin Avenue	
City	State/Province/Country	ZIP/PostalCode
McLean	VIRGINIA	22101
Relationship: Executive Officer X Director	Promoter	
Clarification of Response (if Necessary):		
Last Name	First Name	Middle Name
Brough	John	J.
Street Address 1	Street Address 2	
c/o Chain Bridge Bancorp, Inc.	1445-A Laughlin Avenue	
City	State/Province/Country	ZIP/PostalCode
McLean	VIRGINIA	22101
Relationship: X Executive Officer X Director	Promoter	
Clarification of Response (if Necessary):		
Last Name	First Name	Middle Name
Leavitt	Paul	
Street Address 1	Street Address 2	
c/o Chain Bridge Bancorp, Inc.	1445-A Laughlin Avenue	
City	State/Province/Country	ZIP/PostalCode
McLean	VIRGINIA	22101
Relationship: Executive Officer X Director	Promoter	
Clarification of Response (if Necessary):		
Last Name	First Name	Middle Name
Evinger	David	M.
Street Address 1	Street Address 2	
c/o Chain Bridge Bancorp, Inc.	1445-A Laughlin Avenue	
City	State/Province/Country	ZIP/PostalCode
McLean	VIRGINIA	22101
Relationship: X Executive Officer X Director	Promoter	
Clarification of Response (if Necessary):		
Last Name	First Name	Middle Name
Jacobi	Thomas	Ε.
Street Address 1	Street Address 2	
c/o Chain Bridge Bancorp, Inc.	1445-A Laughlin Avenue	
City	State/Province/Country	ZIP/PostalCode
McLean Relationship: Executive Officer X Director	VIRGINIA Promoter	22101
Clarification of Response (if Necessary):		
Last Name	First Name	Middle Name
Odeen	Philip	Α.
Street Address 1	Street Address 2	
c/o Chain Bridge Bancorp, Inc.	1445-A Laughlin Avenue	700
City	State/Province/Country	ZIP/PostalCode
McLean	VIRGINIA	22101
Relationship: Executive Officer X Director	Promoter	
Clarification of Response (if Necessary):		
Last Name	First Name	Middle Name

Samuel Street Address 2 Middle Name A.

c/o Chain Bridge Bancorp, Inc.	1445-A Laughlin Avenue	
City	State/Province/Country	ZIP/PostalCode
McLean	VIRGINIA	22101
Relationship: Executive Officer Direct	or Promoter	
Clarification of Response (if Necessary):		
Last Name	First Name	Middle Name
Monett	Jon	
Street Address 1	Street Address 2	
c/o Chain Bridge Bancorp, Inc.	1445-A Laughlin Avenue	
City	State/Province/Country	ZIP/PostalCode
McLean	VIRGINIA	22101
Relationship: Executive Officer Direct	or Promoter	
Clarification of Response (if Necessary):		
Last Name	First Name	Middle Name
Brewer	Guy	Α.
Street Address 1	Street Address 2	
c/o Chain Bridge Bancorp, Inc.	1445-A Laughlin Avenue	
City	State/Province/Country	ZIP/PostalCode
McLean	VIRGINIA	22101
Relationship: X Executive Officer Direct	or Promoter	
Clarification of Response (if Necessary):		
4. Industry Group		
Agriculture	Health Care	Retailing
Banking & Financial Services	Biotechnology	
—	Biotechnology	Restaurants
X Commercial Banking	Health Insurance	Technology
Insurance		
Investing	Hospitals & Physicians	Computers
Investment Banking	Pharmaceuticals	Telecommunications
Pooled Investment Fund	Other Health Care	Other Technology
Is the issuer registered as	Manufacturing	Travel
an investment company under	Real Estate	Airlines & Airports
the Investment Company Act of 1940?		
	Commercial	Lodging & Conventions
Yes	Construction	
Other Banking & Financial Services		Tourism & Travel Services
Business Services	REITS & Finance	Other Travel

Other Energy

Business Services

Coal Mining

Electric Utilities

Energy Conservation Environmental Services

Energy

Oil & Gas

# 5. Issuer Size

Revenue Range	OR	Aggregate Net Asset Value Range	
No Revenues		No Aggregate Net Asset Value	
\$1 - \$1,000,000		\$1 - \$5,000,000	
\$1,000,001 - \$5,000,000		\$5,000,001 - \$25,000,000	
x \$5,000,001 - \$25,000,000		\$25,000,001 - \$50,000,000	

Other

Residential

Other Real Estate

\$25,000,001 - \$100,000,000	\$50,000,001 - \$100,000,000	
Over \$100,000,000	Over \$100,000,000	
Decline to Disclose	Decline to Disclose	
Not Applicable	Not Applicable	
C. Factored Freedom (a) and Freedom (a) Obside a days		
6. Federal Exemption(s) and Exclusion(s) Claimed (se	ест ан тлат арріу)	
	Investment Company Act Section 3(c)	
Rule 504(b)(1) (not (i), (ii) or (iii))	Section 3(c)(1)	
Rule 504 (b)(1)(i)	Section 3(c)(2)	
Rule 504 (b)(1)(ii)	Section 3(c)(3) Section 3(c)(11)	
Rule 504 (b)(1)(iii)	Section 3(c)(4)	
X Rule 506(b)		
Rule 506(c)	Section 3(c)(5)	
Securities Act Section 4(a)(5)	Section 3(c)(6)	
	Section 3(c)(7)	
7. Type of Filing		
X New Notice Date of First Sale 2017-12-28 First Sal	e Yet to Occur	
Amendment		
8. Duration of Offering		
Does the Issuer intend this offering to last more than one	year? Yes X No	
-		
9. Type(s) of Securities Offered (select all that apply)		
X Equity	Pooled Investment Fund Interests	
Debt	Tenant-in-Common Securities	
Option, Warrant or Other Right to Acquire Another Sec		
Sequeity to be Acquired Upon Exercise of Option Warrant or Other Bight to		
Acquire Security	Other (describe)	
10. Business Combination Transaction		
Is this offering being made in connection with a business or exchange offer?	combination transaction, such as a merger, acquisition	
Clarification of Response (if Necessary):		
Clarification of Response (if Necessary):		
11. Minimum Investment		
Minimum investment accepted from any outside investor	\$2,200 USD	
12. Sales Compensation		
Decisiont		
Recipient	Recipient CRD Number 🗙 None	
(Associated) Broker or Dealer X None	(Associated) Broker or Dealer CRD Number X None	
Street Address 1 City	Street Address 2 State/Province/Country	ZIP/Postal Code
State(s) of Solicitation (select all that apply) Check "All States" or check individual States	s Foreign/non-US	
13. Offering and Sales Amounts		
Total Offering Amount \$6,600,000 USD or Indefin	ite	
Total Amount Sold \$6,600,000 USD		
Total Remaining to be Sold \$0 USD or Indefin	ite	

#### 14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering.

Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

# 15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

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Sales Commissions \$0 USD Estimate Finders' Fees \$0 USD Estimate

Clarification of Response (if Necessary):

# 16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

Clarification of Response (if Necessary):

## Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

### Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the
  accordance with applicable law, the information furnished to offerees.\*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Rule 504 or Rule 506 for one of the reasons stated in Rule 504(b)(3) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
CHAIN BRIDGE BANCORP INC	/s/ David M. Evinger	David M. Evinger	President & Corporate Secretary	2018-01-08

# 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.

\* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.