## Edgar Filing: Pacira Pharmaceuticals, Inc. - Form 4

June 05, 20									
FOR	M 4 UNITED	STATES	<b>ID EXCHANGE</b>	OMB APPROVAL E COMMISSION OMB					
		0111100		Number: 3235-0287					
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subject Section Form 4	t to <b>SIAIE</b> n 16.	MENT O	F CHAI	SECURI		WNERSHIP OF	Estimated a burden hou	average Irs per	
Form 5 obligat may co	5 Filed pu	(a) of the	Public U		response 0.5 rities Exchange Act of 1934, ompany Act of 1935 or Section any Act of 1940				
Print or Type	e Responses)								
1. Name and Scibetta Ja	l Address of Reporting ames S	g Person <u>*</u>	2. Issuer Name <b>and</b> Ticker or Trading Symbol Pacira Pharmaceuticals, Inc. [PCRX			5. Relationship of Reporting Person(s) to Issuer			
(Leet)	(Einst)	(MC 141-)			_	X] (Check	c all applicable	e)	
(Last)	(Last) (First) (Middle)			of Earliest Tra Day/Year)	nsaction	Director		6 Owner	
	IRA ACEUTICALS, IN WAY, SUITE 10		06/03/2	-		XOfficer (give titleOther (specify below) below) SVP, Chief Financial Officer			
	(Street)			endment, Date	e Original	6. Individual or Joi	int/Group Filin	ng(Check	
Fil PARSIPPANY, CO 07054				onth/Day/Year)		Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
		(7:-)				Person			
(City)	(State)	(Zip)	Tał	ole I - Non-De	rivative Securities A	Acquired, Disposed of,	or Beneficial	lly Owned	
1.Title of	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	TransactionA Code E	. Securities Acquired (A) or Disposed of (D) Instr. 3, 4 and 5)	SecuritiesFeBeneficially(IOwned(I	orm: Direct D) or Indirect	7. Nature of Indirect Beneficial Ownership	
Security (Instr. 3)		(Month/D	uy/ I cui )		list. 5, 1 and 5)	Following (I	nstr. 4)	(Instr. 4)	
		(Month/D	uy, i cui)		(A)	Reported	nstr. 4)	(Instr. 4)	
		(Month/D	uy) i cui)	Code V A	(A) or	Reported Transaction(s) (Instr. 3 and 4)	nstr. 4)	(Instr. 4)	
(Instr. 3)	eport on a separate lin				(A) or Amount (D) Price	Reported Transaction(s) (Instr. 3 and 4)	nstr. 4)	(Instr. 4)	
(Instr. 3)	eport on a separate lin				(A) or amount (D) Price ially owned directly Persons who res information con required to resp	Reported Transaction(s) (Instr. 3 and 4)	ion of S ire not	(Instr. 4) EC 1474 (9-02)	
(Instr. 3)		ne for each cl ble II - Deri	lass of sec	urities benefic	(A) or Amount (D) Price ially owned directly Persons who res information com required to resp displays a curre number.	Reported Transaction(s) (Instr. 3 and 4) or indirectly. spond to the collect tained in this form a bond unless the form ently valid OMB cont	ion of S ire not	EC 1474	

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Security (Instr. 3)	or Exercise any Price of (Month Derivative Security		iy Aonth/Day/Year)	Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 and 4)					
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (Right to Buy)	\$81 C	06/03/2014		А	70,000	<u>(1)</u>	06/03/2024	Common Stock	70,000				
Reporting Owners													
R	Reporting Owner Name / Address			Relationships									
Reporting Owner Manie / Address			Director	r 10% Owner Officer			Other						
Scibetta James S C/O PACIRA PHARMACEUTICALS, INC. 5 SYLVAN WAY, SUITE 100 PARSIPPANY, CO 07054			NC.		SVP, Chief Financial Officer								
Signa	tures												
/s/ James Scibetta		06/05/2014											
<u>**</u> Signat Reporting		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).
- The stock option vests and becomes exercisable as to 25% of the option shares on June 3, 2015 and as to the remaining option shares insuccessive equal quarterly installments over the subsequent three years, provided that the reporting person remains in continuous service with the issuer as of each vesting 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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