Edgar Filing: Williams Kristen Marie - Form 4

Williams Kris	ten Marie										
Form 4	10										
August 16, 20	Л						OMB AF	PROVAL			
	UNITE	D STATES	OMB Number:	3235-0287							
Check this if no longe subject to Section 16. Form 4 or Form 5 obligations may contin <i>See</i> Instruc	Filed p Section 1	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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								January 31, 2005 verage rs per 0.5	
1(b). (Print or Type Re	sponses)										
1. Name and Address of Reporting Person <u>*</u> Williams Kristen Marie			2. Issuer Name and Ticker or Trading Symbol Pacira Pharmaceuticals, Inc. [PCRX]					5. Relationship of Reporting Person(s) to Issuer			
(Last) C/O PACIRA PHARMACE SYLVAN WA	EUTICALS, I		3. Date of (Month/D 08/14/20		ansaction			Director X Officer (give below)		Owner er (specify	
	Filed(Mor				te Origina	1		 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
PARSIPPAN	1, NJ 07054							Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
	2. Transaction E (Month/Day/Ye	ar) Executio any		3. Transactio Code (Instr. 8) Code V	(Instr. 3,	(A) or	d of (D) 5) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	08/14/2018			S <u>(1)</u>	4,773	D	\$ 47.04 (2)	22,374	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)

1. Title o Derivativ Security (Instr. 3)	ve Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	Date	Amor Unde Secur	le and unt of rlying rities : 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code N	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships							
Treporting C when I when	reporting of the runner runness		10% Owner	Officer	Other				
Williams Kristen Marie C/O PACIRA PHARMACE 5 SYLVAN WAY, SUITE 3 PARSIPPANY, NJ 07054			CAO and General Counsel						
Signatures									
/s/ Kristen	08/16/2018								

Williams

**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).
- The sales reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan previously adopted by the reporting person in (1) accordance with Rule 10b5-1 of the Securities Exchange Act of 1934.

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$46.80 to \$47.243, inclusive. The reporting person undertakes to provide to the issuer, any shareholder of the issuer, or the staff of the Securities (2)

and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.

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.