Pacira Pharmaceuticals, Inc.

Form 4 July 15, 2013

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

2. Issuer Name and Ticker or Trading

OMB Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

January 31, 2005

0.5

Estimated average burden hours per

OMB APPROVAL

response...

if no longer subject to Section 16. Form 4 or Form 5 obligations

Check this box

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

1(b).

Common

Stock

07/12/2013

(Print or Type Responses)

1. Name and Address of Reporting Person *

may continue.

See Instruction

Markvicka 7	Symbol	Symbol Pacira Pharmaceuticals, Inc. [PCRX]					Issuer				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction			Ľ	,		(Check all applicable)		
C/O PACIR PHARMAC SYLVAN V	(Month/Day/Year) 07/12/2013					Director 10% Owner X Officer (give title Other (specify below) below) Vice President, Commercial					
Filed				If Amendment, Date Original iled(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
(City)	NY, NJ 07054 (State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ties Acm	Person uired, Disposed o			
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Ye.	ar) Executi any		3.	4. Securition(A) or Dis (Instr. 3, 4)	ies Ace	quired of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	v	
Common Stock	07/12/2013			M	29,754	A	\$ 1.61	29,754	D		

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

S(1)

29,754 D

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

D

\$32 0

Edgar Filing: Pacira Pharmaceuticals, Inc. - Form 4

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 1.61	07/12/2013		M	29,754	(2)	09/01/2020	Common Stock	29,754

Reporting Owners

Relationships

Director 10% Owner Officer Other

Markvicka Taunia C/O PACIRA PHARMACEUTICALS, INC. 5 SYLVAN WAY, SUITE 100 PARSIPPANY, NJ 07054

Vice President, Commercial

Signatures

/s/ James Scibetta, attorney-in-fact

07/15/2013

**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 were effected pursuant to a Rule 10b5-1 trading plan previously adopted by the reporting person in accordance with Rule 10b5-1 of the Securities Exchange Act of 1934.
- (2) The stock option vested as follows: 50% of the shares vested upon the date of grant; the remaining shares vested in monthly installments over the succeeding 24 months.

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.

Reporting Owners 2