FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washii

ngton, D.C. 20549	OMB APPROVAL

OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**STATEMENT** 

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response:	0.5							

1. Name and Address of Reporting Person*  HASTINGS PAUL J						2. Issuer Name <b>and</b> Ticker or Trading Symbol Pacira Pharmaceuticals, Inc. [ PCRX ]										ntionship of Reporting all applicable) Director			Person(s) to Issuer 10% Owner		
(Last) (First) (Middle) C/O PACIRA PHARMACEUTICALS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 08/22/2017											Officer (give title pelow)		Other (speci below)		
5 SYLVAN WAY, SUITE 300						4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)						
(Street) PARSIPE	(Street) PARSIPPANY NJ 07054				,										X Form filed by One Reporting Person  Form filed by More than One Reporting  Person						
(City)	(	State) (	Zip)																		
		Tabl	e I - Noi	n-Deriva	ative	Se	curitie	s Acq	uired,	Dis	posed o	f, o	r Ben	efici	ally (	Owne	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						ay/Year) Execution		. Deemed ecution Date, ny onth/Day/Year)		Transaction Disposed Code (Instr. 5)		ities Acquired (A d Of (D) (Instr. 3,				5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										v	Amount		(A) or (D)	Price	•	Reported Transaction(s) (Instr. 3 and 4)				(111511.4)	
Common	Stock			08/22	/2017				S		1,044		D	D \$36		6.15 3,518		D			
		Та									sed of, onvertib					vned					
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  (Month/Day				Date,	Transaction Code (Instr.			ative rities ired osed	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	Deriv	Price of Privative Privati	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	(D) irect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V		(A)		Date Exercisa		Expiration Date	Title	of	mber							

**Explanation of Responses:** 

Remarks:

/s/ Kristen Williams, Attorney-08/24/2017 in-Fact

\*\* 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.