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ALPHARMA Form 4 June 13, 2008									
FORM	4 UNITED STATE				NGE C	OMMISSION	OMB	PROVAL 3235-0287	
Check this if no long subject to Section 16 Form 4 or Form 5 obligation	er STATEMENT (6. Filed pursuant to ¹⁵ Section 17(a) of th	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHI SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1 Section 17(a) of the Public Utility Holding Company Act of 1935 or					Number: Expires: January 31, 2005 Estimated average burden hours per response 0.5		
<i>See</i> Instruction 16(a) of the Investment Company Act of 1940 1(b).									
(Print or Type R	esponses)								
1. Name and Address of Reporting Person [*] 2. Issuer Name and Ticker or Trading 5. Relationship of Issuer UPRICHARD DAVID C Symbol Issuer						Reporting Person(s) to			
(Last)	(First) (Middle)		3. Date of Earliest Transaction (Check			ek all applicable)			
			Day/Year)X_ Director 2008Officer (give below)				title 10% Owner Other (specify below)		
	(Street)	4. If Amendmen	nt, Date Ori	iginal		6. Individual or Joi	int/Group Filin	g(Check	
Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person									
(City)	(State) (Zip)	Table I - N	Non-Deriva	tive Securi	ities Acqu	uired, Disposed of,	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	any	tion Date, if Tran	Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
		Cod	le V Amo	(A) or ount (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock A	06/12/2008	Р	200) A	\$ 23.29	1,200	D		
Common Stock A	06/12/2008	Р	300) A	\$ 23.34	1,500	D		

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

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 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)	4. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
I O	Director	10% Owner	Officer	Other			
UPRICHARD DAVID C C/O ALPHARMA INC. 440 ROUTE 22 EAST BRIDGEWATER, NJ 08807	Х						
Signatures							
By: Karen Sheehan For: David U'Prichard	C.	0	06/12/2008				
**Signature of Reporting Persor	ı		Date				
Explanation of Da		0001					

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).

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.