FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

wasnington,	D.C.	20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

1. Name and Address of Reporting Person* Mulroy Michael H.					QU	2. Issuer Name and Ticker or Trading Symbol QUESTCOR PHARMACEUTICALS INC [QCOR]									Check	all app Direc	olicable) ctor		o Issuer 6 Owner er (specify
(Last) (First) (Middle) 1300 NORTH KELLOGG DRIVE SUITE D					3. Date of Earliest Transaction (Month/Day/Year) 07/31/2014										X Officer (give title Other (specify below) See Remarks				
(Street) ANAHE			92807 Zip)								Indivine)	´							
		Tabl	e I - No	n-Deriv	/ative	Sec	curitie	s Acc	quired,	Dis	posed o	of, o	r Ben	eficia	ally	Owne	ed		
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						Execution Dat		Date,	Transaction Code (Instr.						4 and Sec Ben		ount of ities icially d Following ted	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect
								Code	v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				
Common Stock 0				07/31	1/2014				F		1,304	1) D \$92		\$92	.35 75,759		D		
	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 of Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year)			Execution Date, if any			Transaction Code (Instr.		mber 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			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nui of	ount mber ares					

Explanation of Responses:

1. Represents the surrender of shares to the Company to satisfy the reporting person's aggregate tax withholding obligation upon the vesting of shares of restricted stock granted on 7/31/13.

Remarks:

Title: EVP, Strategic Affairs and General Counsel

/s/ Michael H. Mulroy 08/04/2014

** 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.