FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	DVAL							
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

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

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* MORRIS TIMOTHY E						2. Issuer Name and Ticker or Trading Symbol QUESTCOR PHARMACEUTICALS INC [AMEX: QSC]									heck all ap	pplicable) ector	:	Person(s) to Issuer 10% Owner	
(Last) (First) (Middle) 3260 WHIPPLE ROAD						3. Date of Earliest Transaction (Month/Day/Year) 09/03/2004									A belo	Officer (give title Other (specify below) Sr. VP, Finance & Admin, CFO			
(Street) UNION CITY CA 94587 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) X For For	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Date,			Code (Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)					nd Secu Bene	nount of rities ficially ed Following	6. Owners Form: Dir (D) or Ind (I) (Instr. 4	ect rect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code	v	Amount (A) or (D)		A) or D)	Price	Trans	saction(s) . 3 and 4)			(111501.4)			
Common	Stock, no j	3/2004	2004		P		19,200 A		\$ <mark>0</mark> .	.4	19,200								
		Та	ıble II - D								sed of, onvertib				/ Owned	ı			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transa Code (8)		of Deriv Secu Acqu (A) o Disp	r osed) r. 3, 4	Expiration (Month/D	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amour or Numbe of		8. Price of Derivative Security (Instr. 5)		Owne Form: Direct or Ind (I) (Ins	(D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

/s/ Timothy E. Morris

09/07/2004

** 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.