FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, 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* BEERS ROY JERALD							2. Issuer Name and Ticker or Trading Symbol QUESTCOR PHARMACEUTICALS INC [AMEX: QSC]								o of Report dicable) ctor er (give title v)		son(s) to Iss 10% Ov Other (s below)	vner
(Last) (First) (Middle) 3260 WHIPPLE ROAD						3. Date of Earliest Transaction (Month/Day/Year) 09/17/2004									/P, Sales	and M	,	
(Street) UNION CITY CA 94587 (City) (State) (Zip)					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								5. Individual or Joint/Group Filing (Check Applicable Line) X 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. Transa Date (Month/D						Execution Da			Code (Instr. 8)		(A) or		tr. 3, 4 ar	Benefi Owned Repor	ties cially I Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code V		Amount	(D) Pri			3 and 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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		Derivativ Security		ve es ially ng d tion(s)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable	Ex Da	piration ate	Title	Amount or Number of Shares	1				
Stock Options (Right to	\$0.44	09/17/2004			A		60,000		(2)	09/	/16/2014	Common Stock	60,000	(1)	360,0	000	D	

Explanation of Responses:

- $1.\ Options\ granted\ under\ the\ Questcor\ Pharmaceuticals,\ Inc.\ 1992\ Employee\ Stock\ Option\ Plan$
- 2. Options vest monthly over 48 months from the date of grant. The options have a six month cliff, whereby no options vest until after the sixth month.

/s/ R. Jerald Beers

09/21/2004

** 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.