## Edgar Filing: Gamble Carol A - Form 4

Gamble Car Form 4 March 10, 2													
FORM	14				<b>a</b> •		~~~			OMB AF	PPROVAL		
	•• UNII	ED STATES						OMMISSION	OMB Number:	3235-0287			
Washington, D.C. 20549Check this box if no longer subject to Section 16.STATEMENT OF CHANGES IN BENEFICIAL OF SECURITIESForm 4 or Form 5 obligations may continue.Filed pursuant to Section 16(a) of the Securities Exchan Section 17(a) of the Public Utility Holding Company Act 30(h) of the Investment Company Act of 1 								xchange Act of	VNERSHIP OF ge Act of 1934, bf 1935 or Section				
(Print or Type	Responses)												
1. Name and Address of Reporting Person <sup>*</sup> Gamble Carol A JAZZ PI [JAZZ]						Ticker or CEUTIC		-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) 3. Date of (Month/D C/O JAZZ PHARMACEUTICALS 03/08/20 INC., 3180 PORTER DRIVE						ansaction			Director 10% Owner XOfficer (give title Other (specify below) below) SVP, GC and Secretary				
					nth/Day/Year) Applicable Line) _X_ Form filed by					Dint/Group Filing(Check One Reporting Person More than One Reporting			
(City)	(State)	r (Zip)							Person				
					on-D			-	uired, Disposed of		•		
1.Title of Security (Instr. 3)		2. Transaction Date 2A. Deemed Month/Day/Year) Execution Date, if any (Month/Day/Year)			A. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) Instr. 8) (A) or Code V Amount (D) Price				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	03/09/2010	)		S	V	1,100	D	\$ 11.4	31,859	D			
Common Stock	03/09/2010	I		S	V	1,700	D	\$ 11.41	30,159	D			
Common Stock	03/09/2010			S	V	3,200	D	\$ 11.42	26,959	D			
Common Stock	03/09/2010			S	V	600	D	\$ 11.43	26,359	D			
Common Stock	03/09/2010	l.		S	V	1,500	D	\$ 11.44	24,859	D			

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Common Stock	03/09/2010	S	V 3,200	D	\$ 11.45 21,65	9 D
Common Stock	03/09/2010	S	V 500	D	\$ 21,15	9 D
Common Stock	03/09/2010	S	V 200	D	\$ 20,95 11.47	9 D
Common Stock	03/09/2010	S	V 2,467	D	\$ 11.32 18,49	2 D

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

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 control number.

 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. Transac Code (Instr. 3			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of 8 Underlying Securities I (Instr. 3 and 4) S (		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option (right to buy)	\$ 11.48	03/08/2010		А	v	40,000		<u>(1)</u>	03/07/2020	Common Stock	40,000

## **Reporting Owners**

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
Gamble Carol A C/O JAZZ PHARMACEUTICALS INC. 3180 PORTER DRIVE PALO ALTO, CA 94304			SVP, GC and Secretary						
Signatures									
/s/ Philip J. Honerkamp, as Attorney-in-Fa Gamble	act for Ca	rol A.	03/10/2010						
<u>**</u> Signature of Reporting Person		Date							

## **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).
- (1) The options vest over four years measured from the vesting commencement date, March 8, 2010, with 1/4th vesting on the first anniversary of the vesting commencement date and the remainder vesting in 36 equal monthly installments thereafter.

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.