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FIRST COMMUNITY BANCORP /CA/ Form 4 September 05, 2006

September	05, 2006											
FOR	ΜД									MB APPRO	VAL	
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								ON OMB		35-0287	
	this box			8.	,				Expir	lan	uary 31,	
subject	bject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF)F	nated average	2005 Ie	
Section	on 16. SECURITIES									en hours per		
Form 4 Form 5									•	onse	0.5	
obligat	incu pu							ge Act of 1934 of 1935 or Sec				
may co	ontinue.	· /		Investme	U	-	•					
1(b).	truction				r	<u></u> j -						
(Print or Type	e Responses)											
1. Name and	Address of Reporting	g Person <u>*</u>	2. Issu	er Name a i	nd Ticker	or Tra	ding	5. Relationshi	p of Reporti	ng Person(s)	to	
SANTOR	S	Symbol					Issuer					
				COMM FCBP]	UNITY	BAN	CORP	(Check all applicable)				
(Last)	(First)			of Earliest		n		Director	aiva titla	10% Owner		
6110 EL T	ORDO, P.O. BO		Month/)9/01/	/Day/Year)				_X_Officer (give title Other (specify below)				
UTIU EL I	OKDO, F.O. BO.	A 2300 (J9/01/	2006				Exec Y	Vice Preside	ent and CFO		
	(Street)			nendment, l	-	nal		6. Individual of		up Filing(Chee	ck	
		ł	filed(M	onth/Day/Ye	ear)			Applicable Line _X_ Form filed	· · · · · · · · · · · · · · · · · · ·	rting Person		
RANCHO	SANTA FE, CA	92067								One Reporting	i	
(City)	(State)	(State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								ned		
1.Title of	2. Transaction Date			3. 4. Securities Acquired				5. Amount of	6. Ovum anschir	7. Nature		
Security (Instr. 3)	(Month/Day/Year)	Execution Date, if any		Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)					Ownership Form:		Indirect Beneficial Ownership	
~ /		(Month/Day/	Year)	(Instr. 8)				Owned Dia	Direct (D)	ct (D) (Instr. 4)		
								Following Reported	or Indirect (I)			
						(A) or		Transaction(s)	(Instr. 4)			
				Code V	Amount		Price \$	(Instr. 3 and 4)				
Common	09/01/2006			F	5,100	D	ф 54.07	27,925	D			
Stock							(1)					
Common								13,608	Ι	By IRA		
Stock												
										By the	- C (1	
Common										Trustees FCBP	of the	
Stock								13,917 <u>(2)</u>	I	Deferred	1	

Deferred Compensation Plan

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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)	4. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,			7. Titl Amou Under Secur (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name	e / Address	Relationships							
Treporting o where i the	Direct	or	10% Owner	Officer	Other				
SANTORO VICTOR R	-								
6110 EL TORDO, P.O. BOX 2388Exec Vice President and CFORANCHO SANTA FE, CA 92067Exec Vice President and CFO									
Signatures									
Victor R. Santoro	09/05/2006								

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Reflects closing market price on September 1, 2006.
- (2) Represents the right to receive value equivalent to 13,917 shares of First Community Bancorp common stock under First Community's Directors Deferred Compensation Plan settlable in shares of First Community common stock.

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.

**Signature of

Reporting Person