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FIRST COMMUNITY BANCORP/CA/

Form 4

August 01, 2005

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

FIRST COMMUNITY BANCORP

Symbol

/CA/ [FCBP]

may continue. See Instruction

obligations

1(b).

(Print or Type Responses)

HOPKINS LYNN M

1. Name and Address of Reporting Person *

(Last) (First) (Middle) 6110 EL TORDO, P.O. BOX 2388			3. Date of Earliest Transaction (Month/Day/Year) 07/28/2005					Director 10% Owner X Officer (give title Other (specify below)					
	(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person						
RANCHO						Form filed by More than One Reporting Person							
(City)	(State) (Zip) Table I - Non-Derivative Securities Ac						rities Acq	quired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	ned 3. 4. Securities Acquired n Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) Day/Year) (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)	Oirect Beneficial Ownership (I) (Instr. 4)				
Common Stock	07/28/2005			F	1,788	D	50.38 (1)	21,650	D				
Common Stock								426 (2)	I	By 401(k) Plan			
Common Stock								50	I	As custodian of account for daughter			
								50	I				

OMB APPROVAL

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

5. Relationship of Reporting Person(s) to

(Check all applicable)

Issuer

Estimated average

burden hours per

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Common As

Stock custodian of account

for son

9. Nu

Deriv

Secu

Bene Own Follo Repo Trans (Instr

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

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SEC 1474

(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Tit		8. Price of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transact	ionNumber	Expiration Da	ate	Amou	ınt of	Derivative]
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Unde	rlying	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)]
	Derivative				Securities			(Instr	. 3 and 4)		(
	Security				Acquired]
					(A) or]
					Disposed						-
					of (D)						(
					(Instr. 3,						
					4, and 5)						
					,						
									Amount		
						Date	Expiration		or		
							Date		Number		
									of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

HOPKINS LYNN M 6110 EL TORDO P.O. BOX 2388 RANCHO SANTA FE, CA 92067

Executive Vice President

Signatures

/s/ Lynn M. 08/01/2005 Hopkins

**Signature of Date
Reporting Person

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) Reflects closing market price on July 28, 2005

Reporting Owners 2

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(2) Includes 8 shares of FCBP common stock acquired by the reporting person between June 14, 2005 and June 30, 2005 under the FCBP 401(k) plan. The information in this report is based on a plan statement dated as of June 30, 2005.

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.