#### Edgar Filing: SPECTRUM PHARMACEUTICALS INC - Form 4

SPECTRUM Form 4 June 21, 200	PHARMACEUTICAL	5 INC								
								OMB A	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287	
Check thi if no long							Expires:	January 31, 2005		
subject to Section 1 Form 4 or	6.	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Estimated average burden hours per response 0.			
Form 5 obligation may cont <i>See</i> Instru 1(b).	$\frac{1}{1}$ Section 17(a) of the		Ioldi	ing Com	ipany	Act of	f 1935 or Section			
(Print or Type F	Responses)									
1. Name and A SHROTRIY	Symbol SPECTRUM					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (Middle)	3. Date of Earlie				5661	X Director	10%	Owner	
(Month/I			Month/Day/Year) 6/21/2006				XOfficer (give titleOther (specify below) below) Chairman, CEO & President			
	4. If Amendment	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
IRVINE, CA	Filed(Month/Day/	_X_ I				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State) (Zip)	Table I - No	on-De	rivative (	Securi	ities Acc	uired, Disposed of	or Beneficial	lv Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Do (Month/Day/Year) Execut any (Month	eemed 3. ion Date, if Trans Code n/Day/Year) (Instr	action	4. Securi n(A) or Di (D)	ties A ispose 4 and (A) or	cquired d of	5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of	
Common Stock	06/21/2006	Р		2,500	А	\$ 3.64	128,962	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. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

### Edgar Filing: SPECTRUM PHARMACEUTICALS INC - Form 4

# **Reporting Owners**

Reporting Owner Name / Addr	ess	Relationships							
	Director	10% Owner	Officer	Other					
SHROTRIYA RAJESH C N 157 TECHNOLOGY DRIV IRVINE, CA 92618			Chairman, CEO & President						
Signatures									
/S/ Shyam Kumaria	06/21/2006								

<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).

### **Remarks:**

Shyam Kumaria on behalf of Rajesh Shrotriya by Power of Attorney.

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.