STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

HALEY ROY W Form 4 July 01, 2009

## FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB APPROVAL** 

OMB 3235-0287 Number:

January 31, Expires: 2005

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response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5

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

1(b).

(City)

Stock

(Print or Type Responses)

See Instruction

HALEY ROY W Issuer Symbol CAMBREX CORP [CBM] (Check all applicable) (First) (Middle) (Last) 3. Date of Earliest Transaction (Month/Day/Year) X\_ Director 10% Owner Other (specify Officer (give title ONE MEADOWLANDS PLAZA 06/30/2009 below)

2. Issuer Name and Ticker or Trading

(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)

(Zip)

6. Individual or Joint/Group Filing(Check Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

D

5. Relationship of Reporting Person(s) to

Person

EAST RUTHERFORD, NJ 07073

(State)

1. Name and Address of Reporting Person \*

1.Title of 2. Transaction Date 2A. Deemed 4. Securities 5. Amount of 6. Ownership 7. Nature of Security (Month/Day/Year) Execution Date, if TransactionAcquired (A) or Securities Form: Direct Indirect (Instr. 3) Code Disposed of (D) Beneficially (D) or Beneficial Indirect (I) (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned Ownership Following (Instr. 4) (Instr. 4) Reported (A)

Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Common 06/30/2009 948 \$0 2,746 Α

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

#### Edgar Filing: HALEY ROY W - Form 4

| Derivative          | 2. Conversion           | 3. Transaction Date (Month/Day/Year) |                         | 4.<br>Transactio |                   | 6. Date Exerc<br>Expiration Da | ate        | 7. Title and Amount of | f Derivative | Deriv          |
|---------------------|-------------------------|--------------------------------------|-------------------------|------------------|-------------------|--------------------------------|------------|------------------------|--------------|----------------|
| Security (Instr. 3) | or Exercise<br>Price of |                                      | any<br>(Month/Day/Year) | Code (Instr. 8)  | of<br>Derivative  | (Month/Day/                    | Year)      | Underlying Securities  |              | Secur<br>Bener |
| (111801. 5)         | Derivative              |                                      | (Monui/Day/Tear)        | (IIISII. 0)      | Securities        |                                |            | (Instr. 3 an           | ` ′          | Owne           |
|                     | Security                |                                      |                         |                  | Acquired          |                                |            |                        | ,            | Follo          |
|                     |                         |                                      |                         |                  | (A) or            |                                |            |                        |              | Repo           |
|                     |                         |                                      |                         |                  | Disposed          |                                |            |                        |              | Trans          |
|                     |                         |                                      |                         |                  | of (D) (Instr. 3, |                                |            |                        |              | (Instr         |
|                     |                         |                                      |                         |                  | 4, and 5)         |                                |            |                        |              |                |
|                     |                         |                                      |                         | Code V           | (A) (D)           | Date                           | Expiration | Title Ame              | ount         |                |
|                     |                         |                                      |                         |                  |                   | Exercisable                    | Date       | or                     |              |                |
|                     |                         |                                      |                         |                  |                   |                                |            | Nun<br>of              | nber         |                |
|                     |                         |                                      |                         |                  |                   |                                |            | Sha                    | res          |                |

# **Reporting Owners**

| Reporting Owner Name / Address | Relationships |           |         |       |  |  |  |
|--------------------------------|---------------|-----------|---------|-------|--|--|--|
|                                | Director      | 10% Owner | Officer | Other |  |  |  |
| HALEY ROY W                    |               |           |         |       |  |  |  |
| ONE MEADOWLANDS PLAZA          | X             |           |         |       |  |  |  |
| EAST RUTHERFORD, NJ 07073      |               |           |         |       |  |  |  |
|                                |               |           |         |       |  |  |  |

## **Signatures**

Linda Kresse for Roy W. Haley by POA

07/01/2009

\*\*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).

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.

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