

EDDIE DAVID
 Form 4
 May 02, 2003

| | | | | | |
|---|---------------------------------|--|--|---|--|
| | | UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | |
| Form 4 | | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | | OMB APPROVAL <u>OMB</u> <u>Number:K235-0287</u> <u>Expires: January 31, 2005</u> Estimated average burden hours per response 0.5 | |
| | | 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 | | | |
| | | Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b) | | | |
| (Print or Type Responses) | | | | | |
| 1. Name and Address of Reporting Person | | 2. Issuer Name and Ticker or Trading Symbol | | 6. Relationship of Reporting Person(s) to Issuer (Check all applicable) _____ Director _____ 10% Owner | |
| Eddie, David | | Waste Connections, Inc. (WCN) | | | |
| (Last) (First) (Middle) | 3. IRS Identification Number of | 4. Statement for Month/Day/Year | | | |

Edgar Filing: EDDIE DAVID - Form 4

| | | Reporting Person, if an entity (voluntary) | | May 1, 2003 | | ___XX_ Officer (give _____Other (specify title below) below) Vice President Public Reporting and Compliance | | | | |
|---|--------------------------------------|--|------------------------------|---|-----|--|---|--|---|-------|
| (Street) 35 Iron Point Circle, Suite 200 | | | | 5. If Amendment, Date of Original (Month/Day/Year) | | 7. Individual or Joint/Group Filing (Check Applicable Line) XX_Form filed by One Reporting Person ___Form filed by More than One Reporting Person --See Note 1. | | | | |
| (City) (State) (Zip) Folsom, CA 95630-8589 | | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | |
| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Transaction Date, if any (Month/Day/Year) | 3. Execution Code (Instr. 8) | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned or Reported Indirect Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | V | Amount (A) or (D) | | | | Price |
| Common Stock | 5/1/03 | | A | | 567 | | | 567 | D | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

Edgar Filing: EDDIE DAVID - Form 4

| | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

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

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

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 | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or | 6. Date Exercisable and Expiration Date (Month/Day/Year). | 7. Title and Amount of Securities Underlying Derivative Security |
|--|---|--------------------------------------|--|--------------------------------|--|---|--|
| | | | | | | | |

Edgar Filing: EDDIE DAVID - Form 4

| | Security | Year) | Disposed of (D) (Instr. 3, 4, and 5) | | | | Date Exer-cisable | | Expira-tion Date | Title | Amount or Number of Shares |
|--|----------|-------|--------------------------------------|---|-----|-----|-------------------|--|------------------|-------|----------------------------|
| | | | Code | V | (A) | (D) | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

/s/ David EddieM/02/03

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations.
 See 18 U.S.C. 1001 and 15 U.S.C. 78ff

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

