Feltes

FORM 4			UNIT	ED STAT	FES SECURI	LIE	ES AND EX	ксн	ANGE COMN	ussio	N						
				EDSIA		_	ton, D.C. 2				OMB APP	ROVAL					
	Check this box if no longer									OMB Number: 3235-0287							
	subject to Section 16. Form 4														Expires: Ja 31, 2005	nuary	
	or Form 5 obligations		STATEMENT OF CHANGES IN BENEFICIAL					-							Estimated a	verage	
	may continue. See instruction		OWNERSHIP												burden hours per re	esponse.	
	1(b).		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility												0.5		
			Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940														
(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					
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														applicable)		10%	
						1	Avista C	Corp	oration (AVA	()			Director Officer			Owner Other	
Feltes		Karen		S.								x	(give			(specify	
	(Last)	(First)	(Middle)		3. I.R.S. Identification				4. Statement for	or			title below)			below)	
					Number of Reporting				Month/Day/Ye	ar							
1411 E. Mission Avenue					Person, if an entity								Vice President				
		(Street)			(Voluntary)				Novem	iber 7,	2002						
									5. If Amendment, Date			7. Individual or Joint/Group Filing (Check Appplicable Line)					
									of Original (Month/Year)			x_Form filed by One Reporting Person					
												Form filed by More than One Reporting					
Spokane	(City)	WA (State)		99202 (Zip)								Person					
	(City)			(z . µ)			Table	e I - I	Non-Derivative	Securi	ties Acquired	, Disposed of,	or Beneficia	lly Owned			
1. Title of Security					2. Trans-		3. Trans-		4. Securities Acquired (A)			5. Amount of		6. Ownership	7. Nature of Indirect		
(Instr. 3)					action		action		or Disposed of (D)			Securities		Form:	Beneficial		
					Date		Code (Instr. 8)		(Instr. 3, 4 and 5)			Beneficially Owned at		Direct (D)	Ownership (Instr. 4)		
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Last Updated on 12-10-2002 By Avista Corp Employee