FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per response: 0.5

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* GUSTAVEL JACK W						2. Issuer Name and Ticker or Trading Symbol AVISTA CORP [AVA]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
GOSTAVEL JACK VV															X	Direc	ctor		10% O	wner
(Last) (First) (Middle) 1411 E. MISSION AVE.						3. Date of Earliest Transaction (Month/Day/Year) 09/15/2004										Offic	er (give title w)		Other (below)	specify
					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SPOKANE WA 99202														X		Form filed by One Reporting Person				
																	orm filed by More than One Reporting erson			
(City)	(St	ate) (Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						ar) Ē	Execution f any	Deemed ecution Date, ny onth/Day/Year)				ties Acquired (A) d Of (D) (Instr. 3, 4			and Secur Benef		icially d Following	Form:	Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(111511.4)
Common Stock 09/15/2						2004		P		197(1)		A	\$18	8.24		5,532		D		
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. Deeme Execution if any (Month/Day	Date,	4. Transa Code (8)		of		Expiratio	6. Date Exercisable and Expiration Date (Month/Day/Year)			or	str. 3 ount	t			Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	nership rm: ect (D) Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	of	ares						

Explanation of Responses:

1. Shares purchased under dividend reinvestment plan.

/s/ Jack W. Gustavel

09/20/2004

** Signature of Reporting Person Date

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

- * 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.

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 Number.