

WASTE CONNECTIONS INC/DE

Form 4

June 10, 2002

|   |  |   |  |
|---|--|---|--|
|   | UNITED STATES SECURITIES AND EXCHANGE<br>COMMISSION<br>Washington, D.C. 20549  |   |  |
| Form 4                                  | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP   | OMB APPROVAL<br><br><u>OMB Number: 3235-0287</u><br><br><u>Expires: December 31, 2001</u><br><br>Estimated average burden<br><br>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(f) of the Investment Company Act of 1940<br><br>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 <b>and</b> Ticker or Trading Symbol<br><br>Waste Connections, Inc. / WCNX   | 6. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable)  |  |

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| Bouck, Steven F.<br><br>(Last) (First) (Middle) | 3. IRS Identification Number of Reporting Person, if an entity (voluntary)     | 4. Statement for Month/Year<br><br>May 2002   | ___ Director _____ 10% Owner<br><br>___X___ Officer (give _____ Other (specify title below) below)<br><br>Executive Vice President and C.F.O. |  |  |                                   |
|---|--|---|---|--|--|-----------------------------------|
| 620 Coolidge Drive, Suite 350<br><br>(Street)   | 5. If Amendment, Date of Original (Month/Year)                                 | 7. Individual or Joint/Group Filing (Check Applicable Line)<br>___X___ Form filed by One Reporting Person<br>___ Form filed by More than One Reporting Person |   |  |  |                                   |
| Folsom, CA 95630<br><br>(City) (State) (Zip)    | Table I Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |   |   |  |  |                                   |
| 1. Title of Security (Instr. 4)                 | 2. Transaction Date (Month/Day/Year)   | 3. Transaction Code (Instr. 8)  | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 AND 5)   | 5. Amount of Securities Owned at End of Month (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 4. Nature of Ownership (Instr. 4) |
| Common Stock                                    | 05/09/02   | S   | 10,000 D  | \$36.0632  | 165,922  | D                                 |
|   |  |   |   |  |  |                                   |
|   |  |   |   |  |  |                                   |
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|   |  |   |   |  |  |                                   |

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. 4) | 2. Conversion or Exercise Price of Derivative | 3. Transaction Date (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 | 8. of Derivative Security (Instr. 5) |
|--|---|--------------------------------------|--------------------------------|--|---|--|--------------------------------------|
|--|---|--------------------------------------|--------------------------------|--|---|--|--------------------------------------|

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| Security | Code | V | Dis-posed of (D)<br>(Instr. 3, 4, and 5) |     | Date Exer-cisable | Expira-tion Date | (Inst. 4) |                            |
|----------|------|---|--|-----|-------------------|------------------|-----------|----------------------------|
|          |      |   | (A)                                      | (D) |                   |                  | Title     | Amount or Number of Shares |
|          |      |   |  |     |                   |                  |           |                            |
|          |      |   |  |     |                   |                  |           |                            |
|          |      |   |  |     |                   |                  |           |                            |
|          |      |   |  |     |                   |                  |           |                            |
|          |      |   |  |     |                   |                  |           |                            |
|          |      |   |  |     |                   |                  |           |                            |
|          |      |   |  |     |                   |                  |           |                            |
|          |      |   |  |     |                   |                  |           |                            |
|          |      |   |  |     |                   |                  |           |                            |

Explanation of Responses:

/s/ Steven F. Bouck      June 10, 2002

\*\*Signature of Reporting Person      Date

\*\* 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.