## Edgar Filing: MEDINA DIONISIO GARZA - Form 3

## MEDINA DIONISIO GARZA

Form 3 June 14, 2002

FORM 3

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
WASHINGTON, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

OMB APPROVA	L
<u></u>	
OMB NUMBER: 323	5-0104
EXPIRES:	
JANUARY 31,	2005
ESTIMATED AVERA	GE
BURDEN HOURS	
PER RESPONSE	0.5
I	

	company nec	01 1910				
1.	Name and Address of I	Reporting Person				
Garza Medina, Dionisio						
	(Last)	(First)	(Middle)			
C/o Autoliv Inc., World Trade Center, Klarabergsviadukten 70						
		(Street)				
	Stockholm,	Sweden	SE-107 24			
	(City)	(State)	(Zip)			
2.	Date of Event Requir. June 15, 2002	ing Statement (Month/Day/Year)				
3.	I.R.S. Identification Number of Reporting Person, if an entity (voluntary)					
4.	Issuer Name and Ticke	er or Trading Symbol				
	Autoliv, Inc., [A	ALV]				
5.	Relationship of Report [ X] Director [ ] 10% Owner [ ] Officer (give to be a content of the cont		k all applicable)			
6.	If Amendment, Date of	f Original (Month/Day/Year)				
7.		Group Filing (Check Applicable ne Reporting Person	Line)			
	Form filed by Mo	ore than One Reporting Person				

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 TABLE I - NON-DERIVAT	IVE SECURITIES B	ENEFICIALLY OWNE	 D
1. Title of Security   (Instr. 4)	Securities   Beneficially   Owned	3. Ownership   Form: Direct   (D) or   Indirect (I)   (Instr. 5)	Indirect     Beneficial     Ownership
No securities beneficially owned	     	     	
1. Title of Derivativ	CALLS, WARRANTS  Security (Inst.	s, OPTIONS, CONV	ERTIBLE SECURITIES)
Date Exercisable a.			er,  Expiration Date
			ve Security (Instr. 4)
Title		Amount	or Number of Shares
1. Conversion or Exer	cise Price of De	rivative Securit	У
O. Ownership Form of I	 Derivative Secur	ity: Direct(D) o	r Indirect(I)
6. Nature of Indirect	Beneficial Owne		

EXPLANATION OF RESPONSES:

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/s/	Dionisio G	Garz	a Medina		June	14,	2002
**	SIGNATURE	OF	REPORTING	PERSON	Dž	ATE	

<sup>\*\*</sup> 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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