	OMB APPROVAL				
FORM 3	Filed pursuant	STATEMENT OF BENEF to Section 16(a) of the Securitie Company Act of 1935 or Section	OMB Number: 3235-0104 Expires: January 31, 2005 Estimated average burden hours per response 0.5		
1. Name and Address of Reporting F Belanger, Timothy E.	erson*	2. Date of Event Requiring Statement Month/Day/Year	4. Issuer Name andTicke Natural Alternatives Internatives		6. If Amendment, Date of Original (Month/Day/Year)
(Last) (First) 1185 Linda Vista Drive Suite 200 (Street) San Marcos, CA 92069 (City) (State)	(Middle)	 10/15/2002 3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary) 	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director10% Owner X Officer (give title below) Other (specify below) DescriptionSr VP - Marketing & Sales		7. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person
		Table I - Non-Derivative S	Securities Beneficially Ov	vned	
1. Title of Security (Instr. 4)		2. Amount of Securities Beneficially Owned (Instr.4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Benefic (Instr. 5)	cial Ownership

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
1. Title of Derivative Security (Instr. 4)	2. Date Exercisable(DE) and Expiration Date(ED) (Month/Day/Year)	3. Title and Amount of Underlying Securities (Instr. 4)	4. Conver- sion or Exercise Price of Deri- vative Security	5. Owner- ship Form of Deriv- ative Security: Direct (D) or Indirect (I) (Instr.5)	6. Nature of Indirect Beneficial Ownership (Instr.5)				
	DE / ED	Title / Amount or Number of Shares							
Common Stock Option	06/1/2003 / 6/1/2007	options / 30000	\$2.07	D					

Explanation of Responses:

By: /s/ Timothy E. Belanger ** Signature of Reporting Person

<u>10/15/2002</u> Date

SEC 2270 (07/02)

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). ** 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.