## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Ty	pe Response	s)																	
1. Name and Address of Reporting Person * KERBER JAMES R					2. Issuer Name <b>and</b> Ticker or Trading Symbol FEMALE HEALTH CO [FHCO]							3	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner						
(Last) (First) (Middle) 8547 EAST ARAPAHOE ROAD, NO. J217					3. Date of Earliest Transaction (Month/Day/Year) 06/19/2000							-	Office	(give title belo	ow)	Other (spec	ify belo	w)	
(Street)				4. If A	4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line)  _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
ENGLEV	WOOD, C	O 80112											-	romi me	d by More than	One Reporting	1 CISOII		
(City) (State) (Zip)					Table I - Non-Derivative Securities Acquired, Disposed of,								osed of, or E	or Beneficially Owned					
(Instr. 3)		2. Transaction Date (Month/Day/Year)			if	3. Transaction Code (Instr. 8)			4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			Ownership of		Nature Indirect eneficial	
			(Month	nth/Day/Year)		Coo	de	V	Amount	(A) or (D)	Pri	ice	(Instr. 3 a	.nd 4)		\ /		wnership nstr. 4)	
Common Stock, par value \$.01 per share		06/19/2000				P		•	2,500	Δ	\$ 0.6		366,210			D			
	report on a c	oparate line	for each class of secu Table II -	Deriva	•	ıritic	es Ac	quire	Person the	sons whatained in form dis	no responding this is splays	form a cu Senefi	are urren iciall	not requ itly valid		ormation spond unle trol numbe	ss	EC 14	74 (9-02)
1. Title of	2	3. Transaction			uts, cans. 4.		<u>гганц</u> 5.	.s, op		S, conver Date Exer				tle and	8 Price of	9. Number	of 10.		11. Nature
Derivative Security (Instr. 3)  2.  2.  2.  2.  2.  2.  2.  2.  2.  2			Execution Da	ate, if	Transaction Code				and	and Expiration Date Month/Day/Year)		1	Amo Unde Secu	unt of erlying rities r. 3 and	B. The off Derivative Security (Instr. 5)		Owr Forr Deri Secu Dire or Ir	n of vative rity: ct (D)	p of Indirect Beneficial Ownership (Instr. 4)
					Code	V	(A)	(D)	Dat Exe		Expirat Date	tion ,	Title	Amount or Number of Shares					

#### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
KERBER JAMES R 8547 EAST ARAPAHOE ROAD, NO. J217 ENGLEWOOD, CO 80112	X						

### **Signatures**

James M. Bedore, Attorney-in-fact	04/19/2006			
**Signature of Reporting Person	Date			

#### **Explanation of Responses:**

- \* 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.