# FORM 4

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

OIVIB 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 Typ	e Responses	)																	
1. Name and Address of Reporting Person <sup>*</sup> Frank Mary Margaret					2. Issuer Name and Ticker or Trading Symbol FEMALE HEALTH CO [FHCO]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) C/O THE FEMALE HEALTH COMPANY, 515 NORTH STATE STREET, SUITE 2225 (Street) CHICAGO, IL 60610				-	Date of Earliest Transaction (Month/Day/Year)     10/12/2006  4. If Amendment, Date Original Filed(Month/Day/Year)									Officer (give ti	tle below)	Other	(specify below	v)	
				4										6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _Form filed by More than One Reporting Person					
(City) (State) (Zip)				Table I - Non-Derivative Securities Acquired, Disp										osed of, or Beneficially Owned					
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year				) any	ition	Date, if	Cod		(A) c		rities Acquir Disposed of ( 3, 4 and 5)	(D) Owned Transa	Owned Following Transaction(s)		-	6. Ownership Form:	Beneficial Ownership		
				(Month/D		ay/Year)	C	ode	V Ar	noun	(A) or (D)	Price (Instr.	3 and 4)			Direct (D) or Indirect (I) (Instr. 4)			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	e (Month/Day/Year)	3A. Deemed Execution Date, if		4. 5. Num Transaction Code Securit (Instr. 8) Acquir or Disp of (D) (Instr. 3 and 5)		5. Number of Derivativ Securities Acquired (A or Disposed		Acquired, Disparants, options, of 6. Date Exe Expiration I (Month/Day d		convertible securities reisable and Date		ially Owned	I Amount ing	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported	Owners Form of	Benefic Owners (Instr. 4	
							(A)	(D)	Date Exerc	cisable		expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)	(S) (I) (Instr. 4		
Common Stock Option	\$ 1.27	10/12/2006			A		30,000	. ,	11/1	2/2006 <sup>(</sup>	1) 1	0/12/2016	Commor Stock		\$ 0	30,000	D		
Repor	ting O	wners																	
						Relationships													
Reporting Owner Name / Address Director			Director	10%		Office	er (	Other											

### **Signatures**

Frank Mary Margaret

CHICAGO, IL 60610

James M. Bedore, Attorney-in-fact	10/16/2006
**Signature of Reporting Person	Date

## **Explanation of Responses:**

C/O THE FEMALE HEALTH COMPANY

515 NORTH STATE STREET, SUITE 2225

- \* 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).

Owner

X

(1) Options for one thirty-sixth of the shares vest on the 12th of each month for the 36-month period commencing on November 12, 2006 and ending on October 12, 2009.

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.