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 *- GARGIULO WILLIAM R JR					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) 515 NORTH STATE STREET, SUITE 2225					3. Date of Earliest Transaction (Month/Day/Year) 08/11/2010								X Officer (give title below) Other (specify below) Secretary				
(Street)				4	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					
CHICAG	60, IL 606	54													one responding	2010011	
(City) (State) (Zip)					Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		etion	4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)						6. Ownership Form:	7. Nature of Indirect Beneficial	
							ode	V	Amoun	(A) or at (D)	Price	(Instr. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	ndirect (Instr. 4)		
Common \$.01 per	Stock, pa	r value	08/11/201	0				P	•	200	Α :	\$ 4.505	112,153	3		D	
			Tal		erivative S			quire	the f	orm dis	splays a of, or Ben	curre eficial	ntly valid	OMB conf	spond unle trol numbe		
	I_				g., puts, ca			ts, opt						0.71.0		0 40	144.37
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	Year) Execution Da		te, if Transaction Code ('ear) (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		Amo Und Secu	itle and ount of lerlying urities tr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owner Form of Deriva Securit Direct or Indi	f Beneficia ive Ownersh y: (Instr. 4)	
					Code	V	(A)	(D)	Date Exer		Expiratio Date	n Title	Amount or Number of Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
GARGIULO WILLIAM R JR 515 NORTH STATE STREET SUITE 2225 CHICAGO, IL 60654	X		Secretary				

Signatures

/s/ James M. Bedore, Attorney-in-fact	08/11/2010
**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.