

**AVON FUND FOR RESPONSIBLE  
GOVERNMENT**

NOV 25 11 52  
FEDERAL ELECTION COMMISSION  
OPERATIONS CENTER

NOV 25 A 11 52

**CERTIFIED MAIL  
RETURN RECEIPT REQUESTED**

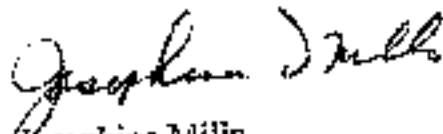
November 22, 2004

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Gentlemen:

Enclosed please find our 30-Day Post-Election Report for the U.S. General Election on  
November 2, 2004.

Sincerely,



Josephine Milis  
Treasurer

JM:am  
Enclosure

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

REGISTRATION SECTION NOV 26 4 11 42

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12PEAMS

AVON FUND FOR RESPONSIBLE GOVERNMENT

ADDRESS (number and street) 1345 AVENUE OF THE AMERICAS

Check if different than previously reported (ADC) NEW YORK NY 10105 0196

2. REC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C

3. IS THIS REPORT NEW OR AMENDED (N) (A)

4. TYPE OF REPORT (Choose One) (a) Monthly Report Due On (b) Quarterly Reports (c) 12-Day PRE-Election Report for the (d) 90-Day POST-Election Report for the

5. Covering Period 10 14 2004 through 11 22 2004

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer JOSEPHINE MILLS

Signature of Treasurer [Handwritten Signature] Date 11 22 2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 9437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FED Form 2X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**AVON FUND FOR RESPONSIBLE GOVERNMENT**

Report Covering the Period: From: 10 14 2004 to: 11 22 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2004</u>	2,411,354	2,411,354
(b) Cash on Hand at Beginning of Reporting Period	5,388,400	
(c) Total Receipts (from Line 19)	3,157,75	3,844,617
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	5,704,175	6,255,971
7. Total Disbursements (from Line 31)	60	5,517,96
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 8(d))	5,704,175	5,704,175
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	00	

This committee has qualified as a multiscandidate committee. (see FED FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-684-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

**AVON FUND FOR RESPONSIBLE GOVERNMENT**

Report Covering the Period:

From:

10/14/2004

To:

11/22/2004

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	3,150.01	38,426.75
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii))	3,150.01	38,426.75
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	3,150.01	38,426.75
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets to Operating Expenditures (Refunds, rebates, etc.) (Carry Totals to Line 37, page 5)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, interest, etc.)	7.76	19.41
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Amount (from Schedule M3)		
(b) Levin Funds (from Schedule M5)		
(c) Total Transfers (add 18(a) and 18(b))		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	3,157.75	38,446.17
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3,157.75	38,446.17



**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	3,150.01	38,426.76
34. Total Contribution Refunds (from Line 25(d))	00	00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3,150.01	38,426.76
36. Total Federal Operating Expenditures (add Line 21(a)(1) and Line 21(b))	00	17,96
37. Offsets to Operating Expenditures (from Line 15, page 3)	00	17,96
38. Net Operating Expenditures (subtract Line 37 from Line 36)	00	17,96

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE	OF
<input type="checkbox"/> 11A	<input type="checkbox"/> 11B	<input type="checkbox"/> 11C	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such reports and statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using this name and address of any political committee to which contributions from such committee.

NAME OF COMMITTEE (in Full)  
**AVON FUND FOR RESPONSIBLE GOVERNMENT**

Full Name (Last, First, Middle Initial)  
**A. GLASER, NANCY**

Mailing Address  
**150 WEST END AVENUE**

City State Zip Code  
**NEW YORK NY 10023**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **AVON PRODUCTS, INC.** Occupation: **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1 0 0 0 0 0**

Date of Receipt: [ ] [ ] [ ]

Amount of Each Receipt this Period: **0 0**

Full Name (Last, First, Middle Initial)  
**B. JUNG, ANDREA**

Mailing Address  
**1021 PARK AVENUE**

City State Zip Code  
**NEW YORK NY 10028**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **AVON PRODUCTS, INC.** Occupation: **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1 0 0 0 0 0**

Date of Receipt: [ ] [ ] [ ]

Amount of Each Receipt this Period: **0 0**

Full Name (Last, First, Middle Initial)  
**C. MATHWS, C. RICHARD**

Mailing Address  
**14 HORATIO STREET, #11H**

City State Zip Code  
**NEW YORK NY 10014**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **AVON PRODUCTS, INC.** Occupation: **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1 0 0 0 0 0**

Date of Receipt: [ ] [ ] [ ]

Amount of Each Receipt this Period: **0 0**

**SUBTOTAL** of Receipts This Page (optional).....▶ **0 0**

**TOTAL** This Period (last page this line number only).....▶ **0 0**

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE	OF
<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)

AVON FUND FOR RESPONSIBLE GOVERNMENT

**A.** Full Name (Last, First, Middle Initial)  
SUSETKA, WILLIAM

Mailing Address  
19 KINNICUTT ROAD

City State Zip Code  
POUND RIDGE NY 10676

FEC ID number of contributing federal political committee:  C

Name of Employer Occupation  
AVON PRODUCTS, INC. EXECUTIVE

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date  100000

Date of Receipt

Amount of Each Receipt this Period

00

**B.** Full Name (Last, First, Middle Initial)  
BAIGH ALEX, SALLY E.

Mailing Address  
127 4TH AVE., #6B

City State Zip Code  
NEW YORK NY 10003

FEC ID number of contributing federal political committee:  C

Name of Employer Occupation  
AVON PRODUCTS, INC. EXECUTIVE

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date  100000

Date of Receipt

Amount of Each Receipt this Period

00

**C.** Full Name (Last, First, Middle Initial)  
LEVITAN, NANCY

Mailing Address  
60 FULTON AVENUE

City State Zip Code  
RYE NY 10580

FEC ID number of contributing federal political committee:  C

Name of Employer Occupation  
AVON PRODUCTS, INC. EXECUTIVE

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date  75000

Date of Receipt

Amount of Each Receipt this Period

00

SUBTOTAL of Receipts This Page (optional)   00

TOTAL This Period (last page this line number only)   00



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedules for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE	OF
<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such contributors.

NAME OF COMMITTEE (In Full)  
**AVON FUND FOR RESPONSIBLE GOVERNMENT**

**A.** Full Name (Last, First, Middle Initial)  
**WALAS, KATHLEEN**

Mailing Address  
**404 EAST 55TH STREET**

City **NEW YORK** State **NY** Zip Code **10022**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **AVON PRODUCTS, INC.** Occupation: **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1 0 0 0 0 0**

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt this Period  
**00**

**B.** Full Name (Last, First, Middle Initial)  
**KROPP, SUSAN**

Mailing Address  
**14 E. 75TH STREET**

City **NEW YORK** State **NY** Zip Code **10021**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **AVON PRODUCTS, INC.** Occupation: **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2 0 0 0 0 0**

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt this Period  
**00**

**C.** Full Name (Last, First, Middle Initial)  
**LING, DENNIS**

Mailing Address  
**93 EASTON ROAD**

City **WESTPORT** State **CT** Zip Code **06880**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **AVON PRODUCTS, INC.** Occupation: **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1 0 0 0 0 0**

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt this Period  
**00**

SUBTOTAL of Receipts This Page (optional) ..... ▶

TOTAL This Period (last page this line number only) ..... ▶

**00**

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER (check only one)		PAGE		OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (in Full)  
**AVON FUND FOR RESPONSIBLE GOVERNMENT**

Full Name (Last, First, Middle Initial)  
**A. LITTLEJOHN, ROBERT F.**

Mailing Address  
**8 BRICK ROW**

City  
**ATHENS**

State  
**NY**

Zip Code  
**12015**

FEC ID number of contributing federal political committee.  
**C**

Name of Employer  
**AVON PRODUCTS, INC.**

Occupation  
**EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**7 5 0 0 0**

Date of Receipt  
\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Amount of Each Receipt this Period  
\_\_\_\_\_ **00**

Full Name (Last, First, Middle Initial)  
**B. PAHLICK, HAROLD E.**

Mailing Address  
**36 LEONARD DRIVE**

City  
**WALDWICK**

State  
**NJ**

Zip Code  
**07463**

FEC ID number of contributing federal political committee.  
**C**

Name of Employer  
**AVON PRODUCTS, INC.**

Occupation  
**EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**7 5 0 0 0**

Date of Receipt  
\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Amount of Each Receipt this Period  
\_\_\_\_\_ **00**

Full Name (Last, First, Middle Initial)  
**C. GIBSON, JESSICA**

Mailing Address  
**75 PROSPECT STREET, APT. 1D**

City  
**EAST ORANGE**

State  
**NJ**

Zip Code  
**07017**

FEC ID number of contributing federal political committee.  
**C**

Name of Employer  
**AVON PRODUCTS, INC.**

Occupation  
**EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1 0 0 0 0 0**

Date of Receipt  
\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Amount of Each Receipt this Period  
\_\_\_\_\_ **00**

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

\_\_\_\_\_ **00**

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:		PAGE		OF
(check only one)				
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (in Full)  
**AVON FUND FOR RESPONSIBLE GOVERNMENT**

**A.** Full Name (Last, First, Middle Initial)  
**FREY, DONALD H.**

Mailing Address  
**827 HUNTLEY DRIVE**

City **WEST HOLLYWOOD** State **CA** Zip Code **90069**

FEC ID number of contributing federal political committee: **C**

Name of Employer **AVON PRODUCTS, INC.** Occupation **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1 0 0 0 0 0**

Date of Receipt: [ ] / [ ] / [ ]

Amount of Each Receipt this Period: **00**

**B.** Full Name (Last, First, Middle Initial)  
**SCALAMANDRE, JILL**

Mailing Address  
**50 EAST 89TH STREET, APT. 3A**

City **NEW YORK** State **NY** Zip Code **10128**

FEC ID number of contributing federal political committee: **C**

Name of Employer **AVON PRODUCTS, INC.** Occupation **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1 0 0 0 0 0**

Date of Receipt: [ ] / [ ] / [ ]

Amount of Each Receipt this Period: **00**

**C.** Full Name (Last, First, Middle Initial)  
**LUO, XIAOCHUN**

Mailing Address  
**47 ROBERTS ROAD**

City **NEW CITY** State **NY** Zip Code **10956**

FEC ID number of contributing federal political committee: **C**

Name of Employer **AVON PRODUCTS, INC.** Occupation **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**8 0 0 0 0 0**

Date of Receipt: [ ] / [ ] / [ ]

Amount of Each Receipt this Period: **00**

**SUBTOTAL of Receipts This Page (optional)** **00**

**TOTAL This Period (see page this line number only)**



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:		PAGE	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**AVON FUND FOR RESPONSIBLE GOVERNMENT**

Full Name (Last, First, Middle Initial)  
**A. LEEDS, TINA**

Mailing Address  
**201 E. 66TH STREET**

City **NEW YORK** State **NY** Zip Code **10021**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AVON PRODUCTS, INC.** Occupation **EXECUTIVE**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date **7,500.00**

Date of Receipt  
\_\_\_\_/\_\_\_\_/\_\_\_\_

Amount of Each Receipt this Period  
**00**

Full Name (Last, First, Middle Initial)  
**B. PENNINGER, ALISA M.**

Mailing Address  
**200 EDEN BRIDGE PLACE**

City **ALPHARETTA** State **GA** Zip Code **30022**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AVON PRODUCTS, INC.** Occupation **EXECUTIVE**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date **4,332.9**

Date of Receipt  
\_\_\_\_/\_\_\_\_/\_\_\_\_

Amount of Each Receipt this Period  
**99.99**

Payroll Deduction  
**\$33.33 Bi-weekly**

Full Name (Last, First, Middle Initial)  
**C. BRANCH, DARYL WAYNE**

Mailing Address  
**535 WOODBROOK WAY**

City **LAWRENCEVILLE** State **GA** Zip Code **30046**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AVON PRODUCTS, INC.** Occupation **EXECUTIVE**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date **8,667.1**

Date of Receipt  
\_\_\_\_/\_\_\_\_/\_\_\_\_

Amount of Each Receipt this Period  
**200.00**

Payroll Deduction  
**\$66.67 Bi-weekly**

SUBTOTAL of Receipts This Page (optional) **3,000.00**

TOTAL This Period (last page this line number only) **3,000.00**

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**AVON FUND FOR RESPONSIBLE GOVERNMENT**

**A. Full Name (Last, First, Middle Initial)**  
**VALONE, RICHARD J.**

Mailing Address  
**3 OLDE LYME RD.**

City **WINCHESTER** State **MA** Zip Code **01890**

FEC ID number of contributing federal political committee: **C**

Name of Employer **AVON PRODUCTS, INC.** Occupation **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Aggregate Year-to-Date **6 5 0 0 0**

Date of Receipt: [ ] / [ ] / [ ]

Amount of Each Receipt this Period: **1 5 0 0 0**

Payroll Deduction **\$50.00 Bi-weekly**

**B. Full Name (Last, First, Middle Initial)**  
**KORDOWSKI, KATHLEEN A.**

Mailing Address  
**34 JACOB ROAD**

City **WASHINGTON TOWNSHIP** State **NJ** Zip Code **06640-1030**

FEC ID number of contributing federal political committee: **C**

Name of Employer **AVON PRODUCTS, INC.** Occupation **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Aggregate Year-to-Date **4 3 3 2 9**

Date of Receipt: [ ] / [ ] / [ ]

Amount of Each Receipt this Period: **4 9 9 9**

Payroll Deduction **\$33.33 Bi-weekly**

**C. Full Name (Last, First, Middle Initial)**  
**SIMON, KENNETH J.**

Mailing Address  
**5 WAYNE VALLEY ROAD**

City **ARMONE** State **NY** Zip Code **10504**

FEC ID number of contributing federal political committee: **C**

Name of Employer **AVON PRODUCTS, INC.** Occupation **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Aggregate Year-to-Date **6 5 0 0 0**

Date of Receipt: [ ] / [ ] / [ ]

Amount of Each Receipt this Period: **1 5 0 0 0**

Payroll Deduction **\$50.00 Bi-weekly**

**SUBTOTAL of Receipts This Page (optional):** **3 9 9 9 9**

**TOTAL This Period (last page this line number only):** \_\_\_\_\_

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:		PAGE	OF
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

AVON FUND FOR RESPONSIBLE GOVERNMENT

**A.** Full Name (Last, First, Middle Initial)  
TORREGROSSA, ANDREW T.

Mailing Address  
1 ORCHARD LANE

City State Zip Code  
RYE NY 10580

FEC ID number of contributing federal political committee: C

Name of Employer Occupation  
AVON PRODUCTS, INC. EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
4,372.9

Date of Receipt  
/ /

Amount of Each Receipt this Period  
999.9

Payroll Deduction  
\$33.33 Bi-weekly

**B.** Full Name (Last, First, Middle Initial)  
SANTINI, ANTHONY

Mailing Address  
10 KINGS GRANT WAY

City State Zip Code  
BRIARCLIFF MANOR NY 10510

FEC ID number of contributing federal political committee: C

Name of Employer Occupation  
AVON PRODUCTS, INC. EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
6,500.0

Date of Receipt  
/ /

Amount of Each Receipt this Period  
1,500.0

Payroll Deduction  
\$50.00 Bi-weekly

**C.** Full Name (Last, First, Middle Initial)  
OWEN, JOHN P.

Mailing Address  
11 COLONEL THOMAS LANE

City State Zip Code  
BEDFORD NY 10506

FEC ID number of contributing federal political committee: C

Name of Employer Occupation  
AVON PRODUCTS, INC. EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
8,667.1

Date of Receipt  
/ /

Amount of Each Receipt this Period  
2,999.9

Payroll Deduction  
\$149.99 Monthly

SUBTOTAL of Receipts This Page (optional) ▶

5,499.9

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:		PAGE		OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (in Full)

**AVON FUND FOR RESPONSIBLE GOVERNMENT**

Full Name (Last, First, Middle Initial)

**A. CORTI, ROBERT J.**

Mailing Address

749 HUNT LANE

City

MANHASSET

State

NY

Zip Code

11030

FEC ID number of contributing federal political committee.

C

Name of Employer

AVON PRODUCTS, INC.

Occupation

EXECUTIVE

Receipt For:

Primary  General  
 Other (specify) ▾

Aggregate Year-to-Date ▾

8 6 6 7 1

Date of Receipt

--	--	--

Amount of Each Receipt this Period

2 0 0 0 1

Payroll Deduction  
\$66.67 Bi-weekly

Full Name (Last, First, Middle Initial)

**B. CONNOLLY, BRIAN C.**

Mailing Address

7 CROYSER ROAD

City

MORRISTOWN

State

NJ

Zip Code

07960

FEC ID number of contributing federal political committee.

C

Name of Employer

AVON PRODUCTS, INC.

Occupation

EXECUTIVE

Receipt For:

Primary  General  
 Other (specify) ▾

Aggregate Year-to-Date ▾

8 6 6 7 1

Date of Receipt

--	--	--

Amount of Each Receipt this Period

2 0 0 0 1

Payroll Deduction  
\$66.67 Bi-weekly

Full Name (Last, First, Middle Initial)

**C. BOTTOMS, MEREYDA L.**

Mailing Address

224 E. 52ND STREET, #23

City

NEW YORK

State

NY

Zip Code

10022

FEC ID number of contributing federal political committee.

C

Name of Employer

AVON PRODUCTS, INC.

Occupation

EXECUTIVE

Receipt For:

Primary  General  
 Other (specify) ▾

Aggregate Year-to-Date ▾

8 6 6 7 1

Date of Receipt

--	--	--

Amount of Each Receipt this Period

2 0 0 0 1

Payroll Deduction  
\$66.67 Bi-weekly

SUBTOTAL of Receipts This Page (optional) →

6 0 0 0 3

TOTAL This Period (last page this line number only) →



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER (check only one)		PAGE OF	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (in Full)  
**AVON FUND FOR RESPONSIBLE GOVERNMENT**

**A.** Full Name (Last, First, Middle Initial)  
**SPECTOR, JANICE I.**

Mailing Address  
**6 VANICK STREET**

City State Zip Code  
**NEW YORK NY 10013**

FEC ID number of contributing federal political committee  
**C**

Name of Employer Occupation  
**AVON PRODUCTS, INC. EXECUTIVE**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date **43329**

Date of Receipt  
\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Amount of Each Receipt this Period  
**9999**

Payroll Deduction  
**\$33.33 Bi-weekly**

**B.** Full Name (Last, First, Middle Initial)  
**JOHANSEN, RENEE W.**

Mailing Address  
**28 MORRIS AVE., UNIT 10**

City State Zip Code  
**SUMMIT NJ 07901**

FEC ID number of contributing federal political committee  
**C**

Name of Employer Occupation  
**AVON PRODUCTS, INC. EXECUTIVE**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date **65000**

Date of Receipt  
\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Amount of Each Receipt this Period  
**15000**

Payroll Deduction  
**\$50.00 Bi-weekly**

**C.** Full Name (Last, First, Middle Initial)  
**MIGNONE, LOUIS P.**

Mailing Address  
**248 WOLF PIT AVENUE**

City State Zip Code  
**NORWALK CT 06851**

FEC ID number of contributing federal political committee  
**C**

Name of Employer Occupation  
**AVON PRODUCTS, INC. EXECUTIVE**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date **86671**

Date of Receipt  
\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Amount of Each Receipt this Period  
**20001**

Payroll Deduction  
**\$66.67 Bi-weekly**

**SUBTOTAL** of Receipts This Page (optional) **45000**

**TOTAL** This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:		PAGE	OF
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**AVON FUND FOR RESPONSIBLE GOVERNMENT**

**A.** Full Name (Last, First, Middle Initial)  
**PAHWA, ASHOK**

Mailing Address  
**1 DEER RUN**

City **RYE BROOK** State **NY** Zip Code **10573**

FEC ID number of contributing federal political committee: **C**

Name of Employer **AVON PRODUCTS, INC.** Occupation **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**4 2 6 6 4**

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt this Period  
**0 0**

**B.** Full Name (Last, First, Middle Initial)  
**BOSWELL, GINA R.**

Mailing Address  
**30 NORTH STREET**

City **RYE** State **NY** Zip Code **10580**

FEC ID number of contributing federal political committee: **C**

Name of Employer **AVON PRODUCTS, INC.** Occupation **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**8 6 5 7 1**

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt this Period  
**2 0 0 0 1**

Payroll Deduction  
**\$66.67 Bi-weekly**

**C.** Full Name (Last, First, Middle Initial)  
**TOLLIVER, ROOSEVELT**

Mailing Address  
**640 COBBLESTONE LANE**

City **STONE MOUNTAIN** State **GA** Zip Code **30087**

FEC ID number of contributing federal political committee: **C**

Name of Employer **AVON PRODUCTS, INC.** Occupation **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**7 5 0 0 0**

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt this Period  
**0 0**

**SUBTOTAL** of Receipts This Page (optional)..... **2 0 0 0 1**

**TOTAL** This Period (last page this line number only).....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		PCRA LINE NUMBER: (check only one)		PAGE		OF		
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (in Full)  
**AVON FUND FOR RESPONSIBLE GOVERNMENT**

Full Name (Last, First, Middle Initial) <b>A. EISSER, DEBORAH A.</b>		Date of Receipt	
Mailing Address <b>101 W. 81ST STREET, #720</b>		[ ] / [ ] / [ ]	
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10024</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>00</b>	
Name of Employer <b>AVON PRODUCTS, INC.</b>	Occupation <b>EXECUTIVE</b>	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ <b>7,500.00</b>			

Full Name (Last, First, Middle Initial) <b>B. TOTH, ROBERT</b>		Date of Receipt	
Mailing Address <b>7 BIRCHDALE KEEPERS WALK</b>		[ ] / [ ] / [ ]	
City <b>VIRGINIA WATER</b>	State <b>SURREY</b>	Zip Code <b>GU254RU U.K.</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>00</b>	
Name of Employer <b>AVON PRODUCTS, INC.</b>	Occupation <b>EXECUTIVE</b>	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ <b>2,000.00</b>			

Full Name (Last, First, Middle Initial) <b>C. EDELMAN, HARRIET</b>		Date of Receipt	
Mailing Address <b>P.O. BOX 98</b>		[ ] / [ ] / [ ]	
City <b>SOUTH KENT</b>	State <b>CT</b>	Zip Code <b>06785</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2,000.01</b>	
Name of Employer <b>AVON PRODUCTS, INC.</b>	Occupation <b>EXECUTIVE</b>	Payroll Deduction <b>\$66.67 Bi-weekly</b>	
Aggregate Year-to-Date ▼ <b>8,567.1</b>			

SUBTOTAL of Receipts This Page (optional)	<b>2,000.01</b>
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:		PAGE		OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (in Full)  
**AVON FUND FOR RESPONSIBLE GOVERNMENT**

Full Name (Last, First, Middle Initial) <b>A. ROSSI JR., ANGELO J.</b>		Date of Receipt	
Mailing Address <b>1 PHEASANT'S RIDGE</b>		<input type="text"/> / <input type="text"/> / <input type="text"/>	
City <b>NORTH GREENVILLE</b>	State <b>DE</b>	Zip Code <b>19807</b>	Amount of Each Receipt this Period <b>2,000.00</b>
FEC ID number of contributing federal political committee <b>C</b>		Payroll Deduction <b>\$66.67 Bi-weekly</b>	
Name of Employer <b>AVON PRODUCTS, INC.</b>	Occupation <b>EXECUTIVE</b>	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ <b>3,667.1</b>			

Full Name (Last, First, Middle Initial) <b>B. FORD, JEAN D.</b>		Date of Receipt	
Mailing Address <b>15 W. 72ND STREET, 10K</b>		<input type="text"/> / <input type="text"/> / <input type="text"/>	
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10023</b>	Amount of Each Receipt this Period <b>1,500.00</b>
FEC ID number of contributing federal political committee <b>C</b>		Payroll Deduction <b>\$50.00 Bi-weekly</b>	
Name of Employer <b>AVON PRODUCTS, INC.</b>	Occupation <b>EXECUTIVE</b>	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ <b>6,500.00</b>			

Full Name (Last, First, Middle Initial) <b>C. TUNNACLIFFE, JOHN V.</b>		Date of Receipt	
Mailing Address <b>25 GLACIER DRIVE</b>		<input type="text"/> / <input type="text"/> / <input type="text"/>	
City <b>WEST WINDSOR</b>	State <b>NJ</b>	Zip Code <b>08550</b>	Amount of Each Receipt this Period <b>999.99</b>
FEC ID number of contributing federal political committee <b>C</b>		Payroll Deduction <b>\$33.33 Bi-weekly</b>	
Name of Employer <b>AVON PRODUCTS, INC.</b>	Occupation <b>EXECUTIVE</b>	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ <b>4,332.9</b>			

SUBTOTAL of Receipts This Page (optional).....▶	<b>4,500.00</b>
TOTAL This Period (last page this line number only).....▶	<b>3,150.03</b>

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 11-19-04
<input type="checkbox"/> USPS Priority Mail	Postmarked
	Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>Am. 10</i>	<i>11-26-04</i>
PREPARER (5/2004)	DATE PREPARED