

**AVON FUND FOR RESPONSIBLE
GOVERNMENT**

RECEIVED
FEDERAL
OPERATIONS CENTER

2004 OCT 23 A 11:34

**CERTIFIED MAIL
RETURN RECEIPT**

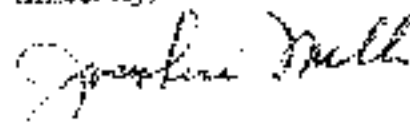
October 18, 2004

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

Gentlemen:

Enclosed is our 12-Day Pre-Election Report for the U.S. General Election on November 2, 2004.

Sincerely,



Josephine Mills
Treasurer

JM:sg
Enc.

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

REGISTRATION CENTER
2004 OCT 23 AM 11:34

1. NAME OF COMMITTEE (In full) **TYPE OR PRINT** Example: If typing, type over the lines. **1275485**
AVON FUND FOR RESPONSIBLE GOVERNMENT

ADDRESS (number and street) **1345 AVENUE OF THE AMERICAS**
 Check if different than previously reported. (ACC) **NEW YORK NY 10105-0196**

2. FEC IDENTIFICATION NUMBER **C 00112722**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
CITY STATE ZIP CODE

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 28 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (Y1)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Recall (12R)
 Committee (12C) Special (12S)
Election on **11 / 02 / 2004** in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Recall (30R) Special (30S)
Election on / / in the State of

5. Covering Period **10 / 01 / 2004** through **10 / 18 / 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 *Josephine Mills* Date **10 / 18 / 2004**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

AVON FUND FOR RESPONSIBLE GOVERNMENT

Report Covering the Period:

From:

10

01

2004

To:

10

18

2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
8. (a) Cash on Hand January 1, 2004		2411354
(b) Cash on Hand at Beginning of Reporting Period	5293399	
(c) Total Receipts (from Line 18)	95001	3528842
(d) Subtotal (add Lines 8(b) and 8(c) for Column A and Lines 8(a) and 8(c) for Column B)	5388400	5940196
7. Total Disbursements (from Line 31)	00	551796
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 8(d))	5388400	5388400
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

AVON FUND FOR RESPONSIBLE GOVERNMENT

Report Covering the Period: From: 10/01/2004 To: 09/30/2004

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)	950.01	35276.75
(ii) Unitemized		
(ii) TOTAL (add Lines 11(a)(i) and (ii))	950.01	35276.75
(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 39, page 5])	950.01	35276.75
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.)	00	1367
18 Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)	00	00
(b) Levin Funds (from Schedule H5)	00	00
(c) Total Transfers (add 18(a) and 18(b))	00	00
19 Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	950.01	35288.42
20 Total Federal Receipts (subtract Line 18(c) from Line 19)	950.01	35288.42

DETAILED SUMMARY PAGE
of Disbursements

FEC Form SX (Rev. 08/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4):		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures Bank Fees	00	1796
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	00	550000
24. Independent Expenditures (see Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (see Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §481(20))		
(a) Allocated Federal Election Activity (from Schedule H6):		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	00	551796
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	00	551796

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 9X (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)	9 5 0 0 1	3 5 2 7 6 7 5
34. Total Contribution Refunds (from Line 2B(d))	0 0	0 0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9 5 0 0 1	3 5 2 7 6 7 5
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0 0	1 7 9 6
37. Offsets to Operating Expenditures (from Line 16, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0 0	1 7 9 6

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

Use separate schedules for each category of the Listed 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	

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 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 **NEW YORK** State **NY** Zip Code **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: **1,000.00**

Date of Receipt: **0 0 / 0 0 / Y Y Y Y**

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

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

Mailing Address
1021 PARK AVENUE

City **NEW YORK** State **NY** Zip Code **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: **1,000.00**

Date of Receipt: **0 0 / 0 0 / Y Y Y Y**

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

Full Name (Last, First, Middle Initial)
C. MATHEWS, G. RICHARD

Mailing Address
14 HORATIO STREET, #11H

City **NEW YORK** State **NY** Zip Code **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: **1,000.00**

Date of Receipt: **0 0 / 0 0 / Y Y Y Y**

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

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

TOTAL This Period (last page this Form required only) **0 0**

SCHEDULE A (FEC Form SX)
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	<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)
SUSETKA, WILLIAM

Mailing Address
19 KINNICUTT ROAD

City State Zip Code
FOUNDS RIDGE NY 10676

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
0 0 0 0

Amount of Each Receipt this Period
0 0

B. Full Name (Last, First, Middle Initial)
HAIGH ALEX, SALLY S.

Mailing Address
127 4TH AVE., #5B

City State Zip Code
NEW YORK NY 10003

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
0 0 0 0

Amount of Each Receipt this Period
0 0

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
AVON PRODUCTS, INC.

Occupation
EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7 5 0 0 0

Date of Receipt
0 0 0 0

Amount of Each Receipt this Period
0 0

SUBTOTAL of Receipts This Page (optional) ▶

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:		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"/> 12	<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

First Name (Last, First, Middle Initial) A. WALAS, KATHLEEN		Date of Receipt 01/24/00	
Mailing Address 404 EAST 55TH STREET			
City NEW YORK	State NY	Zip Code 10022	
FEC ID number of contributing federal political committee C		Amount of Each Receipt this Period 0.00	
Name of Employer AVON PRODUCTS, INC.		Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. KROFF, SUSAN		Date of Receipt 01/24/00	
Mailing Address 14 E. 75TH STREET			
City NEW YORK	State NY	Zip Code 10021	
FEC ID number of contributing federal political committee C		Amount of Each Receipt this Period 0.00	
Name of Employer AVON PRODUCTS, INC.		Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date 2000.00	

Full Name (Last, First, Middle Initial) C. LING, DENNIS		Date of Receipt 01/24/00	
Mailing Address 93 EASTON ROAD			
City WESTPORT	State CT	Zip Code 06880	
FEC ID number of contributing federal political committee C		Amount of Each Receipt this Period 0.00	
Name of Employer AVON PRODUCTS, INC.		Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	0.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

FOP LINE NUMBER		PAGE		OF
10a	11a	11b	12	
13	14	15	16	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 ▼

750.00

Date of Receipt

2/27/07

Amount of Each Receipt this Period

00

Full Name (Last, First, Middle Initial)

B. FAHLOCK, HAROLD E.

Mailing Address

36 LEONARD DRIVE

City

WALDWICK

State

NY

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 ▼

750.00

Date of Receipt

2/27/07

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 ▼

1000.00

Date of Receipt

2/27/07

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 schedules for each category of the Issues 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	<input type="checkbox"/> 18	<input type="checkbox"/> 19	<input type="checkbox"/> 20

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NAME OF COMMITTEE (in full)
AVON FUND FOR RESPONSIBLE GOVERNMENT

Full Name (Last, First, Middle Initial)
A. PREY, 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 **1000.00**

Date of Receipt
08/01/2008

Amount of Each Receipt this Period
00

Full Name (Last, First, Middle Initial)
B. 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 **1000.00**

Date of Receipt
08/01/2008

Amount of Each Receipt this Period
00

Full Name (Last, First, Middle Initial)
C. 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 **800.00**

Date of Receipt
08/01/2008

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 Expenditure Page		FOH 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"/> 17
<input type="checkbox"/> 18	<input type="checkbox"/> 14	<input type="checkbox"/> 15			

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

A. Full Name (Last, First, Middle Initial)
KUTA, ADAM

Mailing Address
23 FAIRWEATHER DRIVE

City **NORWALK** State **CT** Zip Code **06851**

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 **750.00**

Date of Receipt: **07/01/2011**

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

B. Full Name (Last, First, Middle Initial)
SCHLESINGER, ALISON HILL

Mailing Address
501 E. 97TH STREET

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 **1,000.00**

Date of Receipt: **07/01/2011**

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

C. Full Name (Last, First, Middle Initial)
KLEMAN, GILBERT

Mailing Address
25 HOPE FARM ROAD

City **GREENWICH** State **CT** Zip Code **06830**

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 **1,000.00**

Date of Receipt: **07/01/2011**

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

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

TOTAL This Period (first 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: PAGE OF	
(check only one)		11a	12
<input type="checkbox"/>	<input type="checkbox"/>	11b	13
<input type="checkbox"/>	<input type="checkbox"/>	11c	14
<input type="checkbox"/>	<input type="checkbox"/>	11d	15
<input type="checkbox"/>	<input type="checkbox"/>	11e	16
<input type="checkbox"/>	<input type="checkbox"/>	11f	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 committee.

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
03 / 01 / 2003

Amount of Each Receipt this Period
000

Full Name (Last, First, Middle Initial)
B. PENINGER, 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 ▼
3,333.00

Date of Receipt
03 / 01 / 2003

Amount of Each Receipt this Period
3,333

Payroll Deduction
\$33.33 Bi-weekly

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

Mailing Address
535 WOODBROOK WAY

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

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 ▼
6,667.00

Date of Receipt
03 / 01 / 2003

Amount of Each Receipt this Period
6,667

Payroll Deduction
\$66.67 Bi-weekly

SUBTOTAL of Receipts This Page (optional) **10000**

TOTAL This Period (last page this line number only) **10000**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate or reduce(s) for each category of this Detailed Summary Page

FOR LINE NUMBER (check only one)		PAGE	OF
<input type="checkbox"/> 110	<input type="checkbox"/> 115	<input type="checkbox"/> 110	<input type="checkbox"/> 12
<input type="checkbox"/> 12	<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. VALONE, RICHARD J.

Mailing Address
3 OLDE LIME 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 **500.00**

Date of Receipt
08/01/88

Amount of Each Receipt this Period
500.00

Payroll Deduction
\$50.00 Bi-weekly

Full Name (Last, First, Middle initial)
B. ROKOWSKI, KATHLEEN A.

Mailing Address
34 JACOB ROAD

City **WASHINGTON TOWNSHIP** State **NJ** Zip Code **08640-1030**

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 **33.33**

Date of Receipt
08/01/88

Amount of Each Receipt this Period
33.33

Payroll Deduction
\$33.33 Bi-weekly

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

Mailing Address
5 WAYNE VALLEY ROAD

City **ARMONK** 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 **500.00**

Date of Receipt
08/01/88

Amount of Each Receipt this Period
500.00

Payroll Deduction
\$50.00 Bi-weekly

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

TOTAL This Period (last page this line in total only) **▶**

1333.33

**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"/> 1a	<input type="checkbox"/> 1b	<input type="checkbox"/> 1c	<input type="checkbox"/> 1d	<input type="checkbox"/> 1e
<input type="checkbox"/> 1f	<input type="checkbox"/> 1g	<input type="checkbox"/> 1h	<input type="checkbox"/> 1i	<input type="checkbox"/> 1j

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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 **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 ▼
33330

Date of Receipt
06/01/2008

Amount of Each Receipt this Period
3333

Payroll Deduction
\$33.33 BI-weekly

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

Mailing Address
10 KING GRANT WAY

City **BELLEVILLE MANOR** State **NY** Zip Code **10510**

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 ▼
50000

Date of Receipt
06/01/2008

Amount of Each Receipt this Period
5000

Payroll Deduction
\$50.00 BI-weekly

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

Mailing Address
11 COLONEL THOMAS LANE

City **BEDFORD** State **NY** Zip Code **10506**

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 ▼
55001

Date of Receipt
06/01/2008

Amount of Each Receipt this Period
00

SUBTOTAL of Receipts This Page (optional) ➔

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

8333

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. COULT, ROBERT J.

Mailing Address
749 HUNE 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 **66670**

Date of Receipt: **06/06/07**

Amount of Each Receipt This Period: **6667**

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

Full Name (Last, First, Middle Initial)
B. CONNOLLY, BRIAN C.

Mailing Address
7 GROUSEN 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 **66670**

Date of Receipt: **06/06/07**

Amount of Each Receipt This Period: **6667**

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

Full Name (Last, First, Middle Initial)
C. BOTTOMS, NEREYDA 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 **66670**

Date of Receipt: **06/06/07**

Amount of Each Receipt This Period: **6667**

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

SUBTOTAL of Receipts This Page (optional): **20001**

TOTAL This Period (last page this line number only): **20001**

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

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

A. SPECTOR, JANICE L.
 Full Name (Last, First, Middle Initial)
 Mailing Address
6 VARICK STREET
 City **NEW YORK** State **NY** Zip Code **10013**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: **AVON PRODUCTS, INC.** Occupation: **EXECUTIVE**
 Receipt For: Primary General
 Other (specify)

Date of Receipt: **01/01/2008**
 Amount of Each Receipt this Period: **333.33**
Payroll Deduction
\$33.33 Bi-weekly

B. JOHANSEN, RENEE W.
 Full Name (Last, First, Middle Initial)
 Mailing Address
28 MORRIS AVE., UNIT DR
 City **SUMMIT** State **NJ** Zip Code **07901**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: **AVON PRODUCTS, INC.** Occupation: **EXECUTIVE**
 Receipt For: Primary General
 Other (specify)

Date of Receipt: **01/01/2008**
 Amount of Each Receipt this Period: **500.00**
Payroll Deduction
\$50.00 Bi-weekly

C. MIGNONE, LOUIS F.
 Full Name (Last, First, Middle Initial)
 Mailing Address
246 WOLFPIE AVENUE
 City **NORWALK** State **CT** Zip Code **06851**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: **AVON PRODUCTS, INC.** Occupation: **EXECUTIVE**
 Receipt For: Primary General
 Other (specify)

Date of Receipt: **01/01/2008**
 Amount of Each Receipt this Period: **666.67**
Payroll Deduction
\$66.67 Bi-weekly

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (start 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		PRD:	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 16	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19

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

Full Name (Last, First, Middle Initial)
A. PAJWA, ASUDK

Mailing Address
1 DEER RUN

City State Zip Code
RYE BROOK NY 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
03/01/2008

Amount of Each Receipt this Period
0 0

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

Mailing Address
30 NORTH STREET

City State Zip Code
RYE NY 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 ▼
6 6 6 7 0

Date of Receipt
03/01/2008

Amount of Each Receipt this Period
6 6 6 7

Payroll Deduction
\$66.67 Bi-weekly

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

Mailing Address
640 COBBLESTONE LANE

City State Zip Code
STONE MOUNTAIN GA 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
03/01/2008

Amount of Each Receipt this Period
0 0

SUBTOTAL of Receipts This Page (optional) **6 6 6 7**

TOTAL This Period (last page this line number only) **6 6 6 7**

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"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19	<input type="checkbox"/> 20	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial)
A. FLEMING, JOHN

Date of Receipt
 01/01/00

Mailing Address
 200 HILL CROSSING

City State Zip Code
 WEST COLLEYVILLE TX 76034

FEC ID number of contributing federal political committee
 C

Name of Employer Occupation
 AVON PRODUCTS, INC. EXECUTIVE

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) 100000

Amount of Each Receipt this Period
 00

Full Name (Last, First, Middle Initial)
B. REGGIARDO, VANESSA

Date of Receipt
 01/01/00

Mailing Address
 808 BROADWAY

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: Aggregate Year-to-Date
 Primary General
 Other (specify) 75000

Amount of Each Receipt this Period
 00

Full Name (Last, First, Middle Initial)
C. TRAT, JANICE

Date of Receipt
 01/01/00

Mailing Address
 93 EASTON ROAD

City State Zip Code
 WESTPORT CT 06880

FEC ID number of contributing federal political committee
 C

Name of Employer Occupation
 AVON PRODUCTS, INC. EXECUTIVE

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) 100000

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 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	
13	14	15	16	17

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NAME OF COMMITTEE (if Full)

AVON FUND FOR RESPONSIBLE GOVERNMENT

Full Name (Last, First, Middle Initial)

A. EISSER, DEBORAH A.

Date of Receipt

Mailing Address

101 W. 81ST STREET, #720

MM / DD / YY

City

NEW YORK

State

NY

Zip Code

10024

Amount of Each Receipt this Period

Amount of Each Receipt this Period: 00

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 ▼

750.00

Full Name (Last, First, Middle Initial)

B. FOTE, ROBERT

Date of Receipt

Mailing Address

7 BIRCHDALE KENNERS WALK

MM / DD / YY

City

VIRGINIA WATER

State

SURREY

Zip Code

GU254RU U.K.

Amount of Each Receipt this Period

Amount of Each Receipt this Period: 00

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 ▼

2000.00

Full Name (Last, First, Middle Initial)

C. EDELMAN, HARRIET

Date of Receipt

Mailing Address

P.O. BOX 98

MM / DD / YY

City

SOUTH KENT

State

CT

Zip Code

06785

Amount of Each Receipt this Period

Amount of Each Receipt this Period: 6667

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 ▼

6667.00

Payroll Deduction
\$66.67 Bi-weekly

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

6667

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	<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"/> 18

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NAME OF COMMITTEE (in full)
AVON FUND FOR RESPONSIBLE GOVERNMENT

A. Full Name (Last, First, Middle Initial)
ROSSI JR., ANGELO J.

Mailing Address
1 PHEASANT'S RIDGE

City **NORTH GREENVILLE** State **DE** Zip Code **19807**

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 **6,667.0**

Date of Receipt
00 00 00

Amount of Each Receipt this Period
6,667

Payroll Deduction
\$66.67 Bi-weekly

B. Full Name (Last, First, Middle Initial)
FORD, JEAN D.

Mailing Address
15 W. 72ND STREET, 10K

City **NEW YORK** State **NY** Zip Code **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 **5,000.0**

Date of Receipt
00 00 00

Amount of Each Receipt this Period
5,000

Payroll Deduction
\$50.00 Bi-weekly

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

Mailing Address
25 GLACIER DRIVE

City **WEST WINDSOR** State **NJ** Zip Code **08550**

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 **3,333.0**

Date of Receipt
00 00 00

Amount of Each Receipt this Period
3,333

Payroll Deduction
\$33.33 Bi-weekly

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


TOTAL This Period (last page use line number only) **▶**

1,500.0

9,500.1

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) 10-18-04
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Express Mail	Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> Postmark Illegible	Postmarked
<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
 PREPARER	10-23-04 DATE PREPARED