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OPERATIONS CENTER

**AVON FUND FOR RESPONSIBLE  
GOVERNMENT**

2005 JAN 24 A 10 28

**CERTIFIED MAIL  
RETURN RECEIPT REQUESTED**

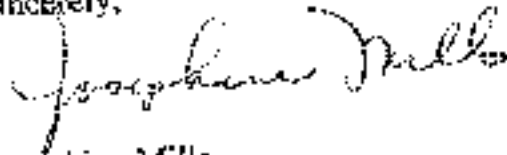
January 13, 2005

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

Dear Sir:

Enclosed is our Year-End Report.

Sincerely,



Josephine Mills  
Treasurer

JM:am  
Enc.

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RECEIVED  
FED MAIL  
OPERATIONS CENTER

2005 JAN 24 A 10 28

Office Use Only

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

1. NAME OF COMMITTEE (In full)

TYPE ON PRINT

Example: If typing, type over the lines.

12FEB4M5

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

CITY

STATE

ZIP CODE

00112722

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(b) Monthly Report Due On:

Feb 20 (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 (YE)

(e) 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)

(c) 12-Day PRE-Election Report for the

Primary (12P)

Convention (12C)

Special (12S)

Election on

In the State of

(d) 30-Day POST-Election Report for the

General (30G)

Runoff (30R)

Special (30S)

Election on

In the State of

5. Covering Period

11 23 2004

through

12 31 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

Date

01 13 2005

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

Office Use Only

FEC FORM 3X (Rev. 02/2003)

**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: **11** **23** **2004** To: **12** **31** **2004**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <b>2004</b>		24,113.54
(b) Cash on Hand at Beginning of Reporting Period	57,041.75	
(c) Total Receipts (from Line 19)	2,059.17	40,505.34
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	59,100.92	64,618.88
7. Total Disbursements (from Line 3)	34.98	5,552.94
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	59,065.94	59,065.94
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 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: **1 1 2 0 0 4** To: **1 2 3 1 2 0 0 4**

**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).....
  - (ii) Unitemized.....
  - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

- (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).....▶

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offset 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.).....

- 18. Transfers from Non-Federal and Levin Funds
  - (a) Non-Federal Account (also Schedule H3).....
  - (b) Levin Funds (from Schedule H6).....
  - (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)).....▶

20. Total Federal Receipts (subtract Line 16(c) from Line 19).....▶

	<b>2,049.86</b>	<b>40,476.62</b>
	<b>2,049.86</b>	<b>40,476.62</b>
	<b>2,049.86</b>	<b>40,476.62</b>
	<b>9.31</b>	<b>28.72</b>
	<b>2,059.17</b>	<b>40,505.34</b>
	<b>2,059.17</b>	<b>40,505.34</b>

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Associated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....	3 4.98	5 2.94
(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 .....	0 0	5 5 0 0.00
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 H5)		
(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)) .....	3 4.98	5, 5 5 2.94
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	3 4.98	5, 5 5 2.94

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2008)

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(c), page 3) .....	2,049.86	40,476.62
34. Total Contribution Refunds (from Line 28(c)) .....	00	00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2,049.86	40,476.62
36. Total Federal Operating Expenditures (add Line 21(a)(1) and Line 21(b)) .....	34.98	52.94
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	34.98	52.94

**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

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

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) **1,000.00**

Date of Receipt  
[ ] [ ] [ ]

Amount of Each Receipt this Period  
**00**

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

Mailing Address  
**1021 PARE AVENUE**

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

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) **1,000.00**

Date of Receipt  
[ ] [ ] [ ]

Amount of Each Receipt this Period  
**00**

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

Mailing Address  
**14 HORATIO STREET, #118**

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

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) **1,000.00**

Date of Receipt  
[ ] [ ] [ ]

Amount of Each Receipt this Period  
**00**

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

TOTAL This Period (last page take 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)			
11a	11b	11c	12
13	14	15	16
			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 KINFLOTT ROAD**

City **POUND RIDGE** State **NY** Zip Code **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 **1,000.00**

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt this Period  
**00**

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

Mailing Address  
**327 4TH AVE., #6B**

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

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt this Period  
**00**

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

Mailing Address  
**60 FULTON AVENUE**

City **NYE** 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 **750.00**

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

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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:  
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 Other (specify) ▼

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

Date of Receipt

Amount of Each Receipt this Period

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

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

Mailing Address  
**93 SASTON 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

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

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (in Full)  
**AVON FUND FOR RESPONSIBLE GOVERNMENT**

Full Name (Last, First, Middle Initial) <b>A. LITTLEJOHN, ROBERT F.</b>		Date of Receipt	
Mailing Address <b>8 BRICK ROW</b>			
City <b>ATRENS</b>	State <b>NY</b>	Zip Code <b>12015</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 5 0 0 0</b>		

Full Name (Last, First, Middle Initial) <b>B. FARLCK, BAROLD E.</b>		Date of Receipt	
Mailing Address <b>36 LEONARD DRIVE</b>			
City <b>WALDWICK</b>	State <b>N.J.</b>	Zip Code <b>07463</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 5 0 0 0</b>		

Full Name (Last, First, Middle Initial) <b>C. GIBSON, JESSICA</b>		Date of Receipt	
Mailing Address <b>75 PROSPECT STREET, APT. 1D</b>			
City <b>EAST ORANGE</b>	State <b>NJ</b>	Zip Code <b>07017</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>1 0 0 0 0 0</b>		

SUBTOTAL of Receipts This Page (optional).....▶	<b>00</b>
TOTAL This Period (total page this line number only).....▶	

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

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

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<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. FREY, DONALD H.</b>		Date of Receipt	
Mailing Address <b>827 HUNTLEY DRIVE</b>		[ ] / [ ] / [ ]	
City <b>WEST HOLLYWOOD</b>	State <b>CA</b>	Zip Code <b>90069</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>100000</b>	

Full Name (Last, First, Middle Initial) <b>B. SCALAMANDRE, JILL</b>		Date of Receipt	
Mailing Address <b>50 EAST 89TH STREET, APT. 3A</b>		[ ] / [ ] / [ ]	
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10128</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>100000</b>	

Full Name (Last, First, Middle Initial) <b>C. LUO, XIAOCHUN</b>		Date of Receipt	
Mailing Address <b>47 ROBERTS ROAD</b>		[ ] / [ ] / [ ]	
City <b>NEW CITY</b>	State <b>NY</b>	Zip Code <b>10956</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>80000</b>	

SUBTOTAL of Receipts This Page (optional).....▶	<b>00</b>
TOTAL This Period (last page this line number only).....▶	<b>00</b>

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

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

FOR LINE NUMBER  
(check only one)

PAGE **01** OF

<input type="checkbox"/> 11A	<input type="checkbox"/> 11B	<input type="checkbox"/> 11C	<input type="checkbox"/> 12
<input type="checkbox"/> 12	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<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)  
**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 ▼  
**7,500.00**

Date of Receipt

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

Amount of Each Receipt this Period

\_\_\_\_.\_\_\_\_

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

Mailing Address  
**501 E. 87TH 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

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

Amount of Each Receipt this Period

\_\_\_\_.\_\_\_\_

**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

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

Amount of Each Receipt this Period

\_\_\_\_.\_\_\_\_

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

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

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**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) <b>A. LEEDS, TINA</b>		Date of Receipt [ ] / [ ] / [ ]	
Mailing Address <b>201 E. 66TH STREET</b>		Amount of Each Receipt This Period <b>00</b>	
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10021</b>	
FEC ID number of contributing federal political committee <b>C</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. FENINGER, ALISA M.</b>		Date of Receipt [ ] / [ ] / [ ]	
Mailing Address <b>200 EDEN BRIDGE PLACE</b>		Amount of Each Receipt This Period <b>66.71</b>	
City <b>ALPHARETTA</b>	State <b>GA</b>	Zip Code <b>30022</b>	
FEC ID number of contributing federal political committee <b>C</b>			
Name of Employer <b>AVON PRODUCTS, INC.</b>	Occupation <b>EXECUTIVE</b>	Payroll Deduction <b>\$33.33 Bi-weekly</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>5,000.00</b>		

Full Name (Last, First, Middle Initial) <b>C. BRANCH, DARYL WAYNE</b>		Date of Receipt [ ] / [ ] / [ ]	
Mailing Address <b>535 WOODBROOK WAY</b>		Amount of Each Receipt This Period <b>133.29</b>	
City <b>LAWRENCEVILLE</b>	State <b>GA</b>	Zip Code	
FEC ID number of contributing federal political committee <b>C</b>			
Name of Employer <b>AVON PRODUCTS, INC.</b>	Occupation <b>EXECUTIVE</b>	Payroll Deduction <b>\$66.67 Bi-weekly</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1,000.00</b>		

SUBTOTAL of Receipts This Page (optional).....	<b>200.00</b>
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form SX)  
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"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 18	<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**

**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 **7 5 0.00**

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt this Period  
**1 0 0.00**

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 **5 0 0.00**

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt this Period  
**6 6 71**

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

**C.** Full Name (Last, First, Middle Initial)  
**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 **7 5 0.00**

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt this Period  
**1 0 0.00**

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

**SUBTOTAL** of Receipts This Page (optional) **2 6 6 71**

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

**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"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17	<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)  
**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 ▼  
**5 0 0.00**

Date of Receipt  
[ ] [ ] [ ]

Amount of Each Receipt this Period  
**6 6.71**

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

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

Mailing Address  
**10 KINGS GRANT WAY**

City **BEAARCLIFF 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 ▼  
**7 5 0.00**

Date of Receipt  
[ ] [ ] [ ]

Amount of Each Receipt this Period  
**1 0 0.00**

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

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

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 ▼  
**9 9 9.98**

Date of Receipt  
[ ] [ ] [ ]

Amount of Each Receipt this Period  
**1 4 9.99**

Payroll Deduction  
**\$149.99 Monthly**

**SUBTOTAL** of Receipts This Page (optional) ..... **3 1 6.70**

**TOTAL** This Period (last page this line number only) ..... **3 1 6.70**

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

Use separate schedule(s) for each category of the Detailed Statement 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"/> 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. CORTI, ROBERT J.**

Mailing Address  
**749 HUNT LANE**

City State Zip Code  
**MANHASSET NY 11030**

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) **3,000.00**

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt This Period  
**1 3 3.29**

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

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

Mailing Address  
**? CROYSER ROAD**

City State Zip Code  
**MORRISTOWN NJ 07960**

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) **1,000.00**

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt This Period  
**1 3 3.29**

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

Full Name (Last, First, Middle Initial)  
**C. BOTTOMS, MEREYDA L.**

Mailing Address  
**224 E. 52ND STREET, #23**

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

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) **1,000.00**

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt This Period  
**1 3 3.29**

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

SUBTOTAL of Receipts This Page (optional) **3 9 9.87**

TOTAL This Period (last page this one 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**

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

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)

Aggregate Year-to-Date **5,000.00**

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

Amount of Each Receipt this Period: **66.71**

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

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

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

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)

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

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

Amount of Each Receipt this Period: **1,000.00**

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

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

Mailing Address  
**248 WOLYPIT 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)

Aggregate Year-to-Date **1,000.00**

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

Amount of Each Receipt this Period: **1,333.29**

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

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

TOTAL This Period (last page this row 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"/> 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**

**A.** Full Name (Last, First, Middle Initial)  
**PABNA, ASBOK**

Mailing Address  
**1 DSER RUN**

City **EYE 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 6.64**

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt this Period  
**00**

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

Mailing Address  
**30 NORTH STREET**

City **EYE** 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 **1 0 0.0000**

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt this Period  
**1 3 3.29**

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

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

Mailing Address  
**640 COPPLESTONE 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 00**

Date of Receipt  
[ ] / [ ] / [ ]

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

**SUBTOTAL** of Receipts This Page (optional) **1 3 3.29**

**TOTAL** This Period (last page this line number only) **1 3 3.29**

**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"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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

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

Mailing Address  
**200 MILL CROSSING**

City **WEST COLLEYVILLE** State **TX** Zip Code **76034**

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**

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

Mailing Address  
**508 BROADWAY**

City **NEW YORK** State **NY** Zip Code **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 **7 5 0 0 0**

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

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

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

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  
\_\_\_\_\_ **0 0**

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

**TOTAL** This Period (last page this five 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	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<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)  
**BLISSER, DEBORAH A.**

Mailing Address  
**101 W. 81ST STREET, #720**

City **NEW YORK** State **NY** Zip Code **10024**

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  
**0.00**

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

Mailing Address  
**7 BIRCHDALE KEEFERS WALK**

City **VIRGINIA WATER** State **SURREY** Zip Code **GU254RU** U.K.

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 ▼  
**2,000.00**

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt this Period  
**0.00**

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

Mailing Address  
**P.O. BOX 98**

City **SOUTH KENT** State **CT** Zip Code **06785**

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  
[ ] / [ ] / [ ]

Amount of Each Receipt this Period  
**1,333.29**

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

SUBTOTAL of Receipts This Page (optional) ▶

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

**1,333.29**

**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	<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**

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

Mailing Address  
**1 PERASANI'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 ▼  
**1,000.00**

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt this Period  
**133.29**

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

**B.** Full Name (Last, First, Middle Initial)  
**ROED, 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 ▼  
**7,500.00**

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt this Period  
**100.00**

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

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

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 ▼  
**5,000.00**

Date of Receipt  
[ ] / [ ] / [ ]

Amount of Each Receipt this Period  
**66.71**


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

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

TOTAL This Period (last page this and number only) ..... **2,049.86**

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) 1-18-05
<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
 PREPARER	1-24-05 DATE PREPARED